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MAN'S PREDOMINANT PASSION—SEXUAL INSTINCT AND ITS CONTROL.

(AN APPEAL TO YOUNG MEN.)

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I propose to suggest some thoughts on the subject of man's passions and their control, from which we may receive inspiration that may aid the mind in arriving at conclusion that will demonstrate the utility and beneficence of the propositions advanced, and may prove an incentive throughout life to better purposes and deeds.

I only wish for time and your courteous attention, that I may tell you more of certain facts of life which are unknown to many and are considered unimportant by some, and by others, are thought to be of a character that would make their teaching vulgar and inappropriate. However, I want to assert that nearly all the vulgar indecency of life, all social and moral crime is due to a want of knowledge of this subject, or from its ignorant contemplation by the non-interested and vicious. The law of Self-Preservation is the primal instinct which in its force and application is distributed in common to life. A close second to that law is the sexual instinct which, as a fundamental principle, is recognized by its characteristic working in the whole world, covering in a definite way all life, animate and vegetative. While not generally recognizable, yet the law of sex applies to the vegetable kingdom with the same force and precision that it does to animal life. Vitality, heredity and continuity in offspring are all perpetuated along analogous lines in life of every kind, and are susceptible to the same influences in a comparative sense, which shows a

common relationship of the different forms of life and the force of the old paraphrase: "But one touch of nature makes all life kin." While the sexual instinct is second in the category, yet it is the strongest of all the relations. Its motive the vitae-sexualis is everywhere distributed to all forms of life in nature.

A paper on this subject could be very easily drawn out and merged into a book of large proportions which to be complete in its character should have chapters on heredity, paternalism, maternal impressions, development of sexual functions, perversions, growth of offspring and all matters relative to biology, physiology, hygiene, the chemistry of life, and relations for a perfect continuity through offspring.

What we shall try to do in the limited space of this paper is to offer a brief synopsis of the working of sexual instinct and its cultivation along moral lines for continuity, and the proper uses of the function for wise purposes of nature with a stoppage of perversions and restriction of abuses which destroy utility and promote debasement and is productive of degeneracy, which is an evidence of the supreme power of a controlling providence to destroy the products of sin and iniquity.

How unfortunate it is to be ignorant of sexual hygiene and a proper sexual conduct, and appreciation of sexual instincts, their proper control by the dominant will of man, and their use for the purposes intended by nature. A knowledge of these facts shows an intellect well-balanced and capable of furthering by transmission through heredity the qualities needed for improving man's condition and his elevation to the high plane of intellectuality that he is capable of attaining through the elimination of all disease potentials and a casting off the manacles of iniquity, which have enthralled him so long. It is impossible to attain puberty and remain neutral to the sexual instinct, or indifferent to either purity or sensuality. A healthy degree of sexuality is absolutely necessary to a high degree of mental and physical perfection. A large degree of sensuality is a curse in its baneful effect, while voluptuousness with its fearful train of evil consequences is fostered in the individual by indulgence of animal appetite. That fact is responsible for more debasement than any other. With no occupation and much rich food time is employed in allowing mind to dwell on carnal things, desire for indulgence is created and gratification comes sequently.

To that incentive is due the degradation of more virtue than to all other causes combined. How many reputations are annihilated, how often has innocence been defiled, and every trust betrayed by the demon, lust. How many people disgraced, how many bodies are being

consumed by disease of sexual origin. How many homes are entered whose sanctity has been polluted. How often has sacred marriage been defiled. How often has love been trampled on and caricatured, while its loftiest impulses have degenerated by surrounding virtue with those things calculated to engender a voluptuous, sensuous, course of life.

How many of us are shocked to know the extent of vice, immorality and harlotry existing in our midst. We are usually silent on these points because their assertion is instantly met by indignant remonstrance and the protest that the sacred things are being defiled by discussion. If the sin exists it ought to be hid. It is against present ethics to allude to it, which manner of treating the subject only tends to foster it. Steep it in ignorance, indulge it in secrecy and it will simply excell in the quality and extent of its iniquity, exhaling a deadly poison whose venom through heredity will continue to contaminate for generations to come.

The present state of society is responsible largely for the existing evil and its consequences. A timid, retiring silence is no absolute sign of a modest purity, but is often the result of participance. "Let him who is without guile throw the first stone." The height of degradation is to be tempted and fall through ignorance. I arraign the fathers who have failed to teach their children the concepts of the uses, importance, the gravity and point out the abuses of the sexual act as being criminally neglectful in their highest duties to offspring. By cultivation the sexual instincts can be either controlled as a procreative fact necessary to continuance of offspring, and robbed of its vulgar odium and iniquity, made pure and laudable, a worthy faculty practiced in reason, for the highest and most sacred purposes of continuing creation on the earth. Or, it can be diverted and turned into channels which are prostituting and iniquitous in its relations and debasing in its moral and devitalizing results.

It is a most noticeable fact that the proportion of bachelors is becoming larger. What are the reasons for that condition? Is it that our women are not all that they should be? Is it because the laws of society and civilization make demands which are not possible of fulfillment? Is it that public senitment demands a monetary, or other equivalent qualification of the prospective, or is it that our young men find the way to houses of prostitution and become so fixed in that habit that they shun the society of virtue and get themselves diverted from all thought of marriage thereby. Let the causes be what they may, we are growing a large percentage of Pariahs in our midst who are a menace to home and social purity. To that class of

young men let me say, "Bad men make bad women." To the man who would say that he is so because of association with bad women I say to him, "You are a moral debased wretch, too mean to kill, and yet too cowardly and depraved to live." "Go drown yourself, that the world may be rid of a loathsome moral leper," association with whom would mean moral and physical debasement and who deserves contemptuous thought and reference from the right minded and honorable.

In the beginning there was a creator who endowed man with the properties of continuance through animal function, thereby deputizing him a sub-creator, which fact is unquestionably the most important of any or all the facts of life. The fact that you are empowered a creator with faculty of transmission should cause one to look forward to marriage and paternalism as the most important moments of life.

Resolve to be discreet and just and instil the essentials of all virtue and rectitude into offspring, develop in them, so far as it can be cultivated principles of the highest morality, loftiest impulses, noblest resolves and strictest integrity. Remember the old Jewish Proverb, "Fathers who have eaten sour grapes set their children's teeth on edge." The age has passed when ignorance and innocence were synonymous. Ignorance now is criminal negligence and innocence exists in the knowledge that evil should be known and understood that virtue and right are the precepts to be followed, and wicked, immoral debasing things should be avoided. Innocence should be synonymous of conscious knowledge and a courage to resist and repel temptation that one may not fall, nor yield to a weak abasement of self that would be degrading. "Strong in the knowledge of right, innocent in its practice and an avoidance of the things that are degenerative and of which we best were cognizant is the proper precept.

Our boys and girls when they arrive at adolescence are then in a state of intellectual activity, are ambitious, aspiring and more susceptible to influence for good or evil then, than any other period of life.

From an educational standpoint this is the most important period of life, when all faculties are maturing and bent according to good or bad inclinations. At this age impressions are most lasting and will influence character for life, therefore this is the proper period to see that they are not plunged into that morass of profound corruption and debasement which belongs to intellects permitted to scorn the good, the pure and laudable qualities of life. Educate them that you may keep reason installed upon a basis superior to the instincts, and by developing the good qualities of mind, the ignoble may be kept in abeyance. The instincts of man are supposed to be followed inde-

pendently of reason. I admit that instinct sways the procreative field and reason is presumed to occupy all other space, yet the high cultivation of reason and its intelligent application to the control of instinct shows the closest relationship of the two faculties and establishes the fact that reason is the faculty which should predominate, holding the instincts and passions in wholesome restraint that they may be thereby the better controlled, and applied to the purposes of nature, freed from the loathsome lustfulness which sometimes becomes a disgusting element in the relations of the sexes. It is inherent in humanity to display imperfection, hence we should condemn faults, but not the actor—help him cultivate the faculty of self-restraint and become a self-governed being of sound judgment and large will-power.

To keep a young man out of the way of temptation and vice that he may have no knowledge thereof and you unfit him for any purpose to which you may have ordained him. Teach him the fallacies of temptation, help him by wise example and council resist the tendency to fall or yield to acts which are sinful. Do not advise or suggest to him that a few wild oats sown are not hurtful. I say, if they partake of the nature of sexual impurity, that instinct is so enormously imperious that it will supply the motive which will alter the course of life, probably wrecking it and entailing consequent misery upon all who may be environed with the fallen one.

The Wild Oat business is one of the common errors of the day and is looked on as excusable when really it is most reprehensible—poisoning purity, and leaving an indelible stain upon the mind and morals of the one contaminated so baneful that degenerate impulses are engendered which by transmission through heredity, will play an important part in the great drama of continuity; of which, each separate generation is an act, and the living beings of that generation the Actors.

To trifle with affairs pertaining to sexual domain and man, simply inoculates posterity and injects a mass of vice and corruption into them which several generations of innocence and rectitude can scarce eradicate. A point that ought to be fully understood is, the pleasure of iniquity is a shallow indulgence which dissipates and fades easily, while the penalty as a morbid process goes down the path of generations destroying thousands.

Ignorant parents never allude to this subject to their children. They leave this vital subject to chance and possibly allow their child to become acquainted with it through association with vicious debased companions, whose damnable influence like the fated spot in Hamlet will not out.

For the love of posterity do not leave to chance the teachings you should inculcate into your children. Your highest duty to offspring rests in your helping unfold the faculties of reason and intellect and to develop them in a manner that will enable the child to recognize right from wrong and good from evil. When enabled to discern the one from the other the developed moral faculty will be capable of deciding the proper course of action to obtain the best results.

How often do we see in the growing child the evidence of gross neglect in this direction. What are the causes? Why a false conception of the laws that aggregate to make up modesty and propriety. A study of those phenomena which make up iniquity and crime go to prove that the natural tendency of man would be toward a lower level, except for a great restraining influence which cannot be analyzed, and yet is comprehended to the extent that we recognize and admit its potency. We appreciate its beneficent result and esteem it of Godly origin, which is a fact. That admission ought to be incentive to induce us to inculcate it on growing mind for its loftiest results. To the well-balanced mind, accepting these conditions as factors in our advancement, the world looks with confidence and trust for its continued elevation in a moral, intellectual and physical way.

I believe the physician is more than any other element the chosen instrument of divine will in bringing about the desired ends. I want to divert and say the church is looked to as the instrument for attaining results wanted, but does it do it? Take the average modern sermon, can the growing mind of children draw a single idea from it that would impress on its development a fact relating to the laws of life or the course to pursue to get the highest, purest and best results therefrom. That is a most serious error, and as a defect must be apparent to the average observer. The suggestion of means for its correction rests not alone with the clergy nor with the physician, but is equally entailed upon the parents. What course pursued would give the best approximate general results? To my mind, the natural recourse is education—broad, liberal, compulsory in character, thorough in course, elevating in moral tone, complete in effect, even to a thorough knowledge of human anatomy, biology and the physiology of function for all the relations of life.

A man who would rear a fine edifice and leave it without a roof would be looked on as a foolish, unwise man. He would be reproached as wanton and unsound in his views and unfit to have the disposition of means at his command. We admit all that, and yet we attempt to rear our children in an elevated way, and leave them in entire ignorance of those biological and physiological facts that are more im-

portant for them to know than anything else that can be taught. For the sake of posterity do not leave your child ignorant of the most essential fact of all life. Rob the information of the vulgar odium which surrounds it, impart it in a comprehensible manner at a proper time that will be thorough in the attainment of the desired object. That information will be so beneficent in result that the people of the coming age will call our generation blessed for their kind interest and information. In my allusion to the church, I would better be more explicit and say, those consecrated men filling our various pulpits are earnestly devoting their lives to duty. They are discharging obligations nobly, and with self-sacrifice, but they can obtain no better result because of general public apathy due largely to ignorance. Were our system of education more full and complete and our laws more explicit, and so framed as to compel attendance of all children upon our schools that they might be educated to the extent of realizing the high, refined teaching from our pulpits, then the church would do more good. The age is past when ignorance and superstition were the handmaids of the church. Now it is the liberal, cultivated mind that can appreciate the words of truth and wisdom flowing like inspiration from our disciples of the church. We are eternally grateful to our clergy of all sects and denominations for the good they are doing. I would suggest to them, you can broaden your useful field and increase good results by advocating the higher education of mankind, and earnestly combat the common sentiment that the aged ought to reform, join the church, repent, be forgiven and die. Center your interest and your effort in getting the youth of the land into the church. Your teaching and example will do good there. The children are the greatest field for ministerial labor that I know of—in them lies all hope for the future of mankind. A course instituted for such purposes would meet the approval of all thoughtful minds, and would be looked on with complaisance and satisfaction. We will take a suppositious case. A young man has attained his majority, has been kept in ignorance of his high purposes and free from temptation, his life has been one of purity, he has never been instructed in its ways, nor has he known his own power nor functions. He is suddenly thrown in the way of temptation, the apple as it were is held out to him by Eve, he partakes and falls. Why, because he has been kept in ignorance of those mighty concepts of sexual function, and proper restraints necessary to sustain and strengthen determination to yield to no known weakness, nor do aught that would becloud the stream of vitality as it descends through him in heredity, for purpose of continuing life in posterity. I do not expect this subject to

appeal very largely to coarse propensity, dull perception, or gross brutality, but those lofty minds quickened by high intellect, a virtuous and honest courage in the attainment of a higher standard for the guidance of mankind—I do ask that class for a large share of interest and approbation, believing that simple facts plainly stated will more directly appeal to a refined intellect, freed from the coarse thought of a vulgar unsubdued passion than would any indirect statement clothed in habit that would possibly render it unrecognizable. Never could Circe and the Sirens have had any influence whatever over Ulysses and his forces had they been at all educated in moral restraint. If a proper conception of the right had animated them, they would have been able by superior moral force to have saved and reformed the sirens. The moral to be drawn from this mythical statement is that man in his strength should not call himself tempted by the foibles of weaker women, but he should feel impelled by superior force and intellect to restrain passion and save women. It is worse than folly to be believed the old story of man's temptation by woman and fall. Man being the stronger creature is trusted and not tempted by woman—she is deceived after trust by the stronger creature and they both fall. I can see no reason to support the old prejudice that woman alone should bear the iniquity and the shame when the paramour, noble man, superior creature that he supposes himself to be, should be allowed to take refuge behind the shield of temptation and sneak off while poor deceived woman is chained to the rock of her environment, as it were—close to the water of iniquity where the waves of adversity can beat with all force upon her defenceless structure, breaking and scattering it beyond all hope of redemption. To draw the simile further, she is left with the poignancy of her commiserating feelings, pitied and despised, she realizes that there is no avenue of hope for her to enter upon a restoration to the once respected condition she occupied previous to her downfall. In despair she ends a life of shame by suicide, while the man, though participant of her guilt, feels no remorse. Such is the edict of our modern civilization. I say earnestly, unless a reconsideration is taken, and the conclusion determined to save our boys from an inner moral debasement, the world will be ruined. Make the degradation fall with equal force upon the evil doers of either sex, or if there is any discrimination, let it favor the girls as being the more innocent.

Set manly virtue upon a high pedestal above the family altar, call to your boys to look on that object as most worthy of observation and attainment. I say attainment, because its retention is not such, until the temptation is repelled and all inclination to transgress sacred

moral law is overcome. We know that unchaste thoughts are an option on virtue, and a loose virtue is gambling with the high destinies of life with all chances against you. Young man beware! When you see a young man who proclaims a lot of good intentions know that he has some bad habits. They are usually associated, and unfortunately, if you will watch him you will find the bad habits much the stronger feature in his character. Let me say to the fathers, no one will deny the salutary influence of early circumstances and training, therefore, if you would shape the character of your sons in that high mould of your dreams and wishes, set them an example by your conduct that would inspire noble thought and aspirations which they would emulate with pride as the highest and best type of duty that could be appreciated and applied to their own course of action in all their future life.

I find my subject too wide for the limits of my paper, or my faculty of concentration will not allow me to compress my ideas into the space of a paper on this subject. I will therefore state my propositions briefly and let your reflection suggest the necessary conclusion. I recognize no impropriety in speaking plainly on this subject. The scientific facts that we want are plain truths, which to be appreciated should be uncovered and given in an unvarnished way so acceptable as to be admitted without fear from the most crucial analytical tests that could be applied.

The futurity of continuity rests in the sexual knowledge of the present generation, whose domain it shall be to arrest sexual degradation and turn the current of active vitality into clean and appropriate channels, that the great law of an improved continuity in offspring may safely ride on the wave-crests of the stream of life to that haven of highest perfection in authropomorphology, where man, would be God's own image, life, a pleasant journey, and death, a cheerful sacrifice upon the altar of continuity, that the forces of universality might be maintained and aided by each individual impulse, should be strengthened, broadened and bounded only by highest possibilities, carried on in multiple ratio until its flow down the streamway of time would be a phenomenal perpetuity. Huxley says knowledge does not go beyond phenomena. To my mind, phenomena seems endless, as we rise in knowledge the phenomena of today are the unknown of yesterday, and the possibility of tomorrow are other phenomena suggested only today. To noble aspiring spirits no homily to truth, honor and fair ambition is more eloquent than the mute contemplation of unborn posterity who must be well and happy or miserable and diseased at our pleasure and discretion. Which course would you choose? Most surely your preference will be for the right

and good, for the moral and sublime, that posterity may approve, and in their lives exemplify your wisdom.

A principle of this paper is to call attention to the fact that the act of copulation, which originally was intended for procreative purposes has been largely brutalized and indulged as a lustful gratification. When it is indulged in that spirit it is debauchery, and prostitution of the high purposes of the power with a sinful waste of the forces of heredity. Any measure having in view the restriction of bestiality is laudable, and should meet with all proper encouragment, that the ultimate annihilation of lust may be achieved and all sinful debauchery overcome. That object is one of first importance, and means more to mankind than any proposition which could now be considered for his good. The remedy to apply is education, high, complete, thorough, that the conditions may be understood and considered properly for best result. I do not wish to overload my description, nor to be too elaborate in my expressions, or impracticably enthusiastic in my delineation of ideal character. Every boy ought to be taught that as he enters upon the threshhold of manhood, he must develop and maintain a certain character. Suggest the possibility that some day that character may be standing in a niche in the picture room of fame, embodying the good qualities of the life exemplified either on canvas or in marble, where it may be observed and conceived as one of the immortal gems of mind. Do not let this pass as an idle dream, for I tell you earnestly, life of necessity is made up of high aspirations, low aspirations, or no aspirations, and you have the great privilege of making your own selection. It were better to aspire higher than one's powers of attainment than not high enough. Be original in your conclusions, do not echo the individuality or attainment of others as your own. You may catch the idea, or get the inspiration from nature, or other source, but let the deductions be your own; let the harvest in result be the consequence of your application. It is absurd to expect acquisition or gain without mental balance to control the effort. Depend largely on your own thinking. Above all things, have a definite object in life, have some ideal conception to guage your efforts to serve as a standard for acquirement. Let it be a high ideal, but practical, and not a metaphysical proposition, but tangible. The philosophy that encourages abstract things is a mistake. The education that instills the concrete into mind is the right theory to practice for permanent good to life.

With the higher education of mind go coincidently the elimination of lust and bestiality, which qualities are largely predominant through ignorance, hence we see that the cultivation of mind by high educa-

tional means will result in promoting the cause of morality and sexual purity in a way superior to any other known. Then why not unitedly and strenuously urge the measure that we may obviate vice and crime. Viciousness in man is usually due to ignorance or degeneracy and will rob manhood of those most cherished principles, which as Truth, Cleanliness of Character, Elements of Health, and Powers of Procreation, fit him for his mission as a sub-creator who may by wise preceding ancestry be endowed with superior powers worthy of transmission and influencing a very elevated standing in his successors, who as worthy posterity will continue the result until it extends beyond the horizon of present knowledge on the subject, and as speculative thought becomes an infinite problem.

One of the noblest aspirations of intellectual manhood should be to aid in uplifting and preserving upon a high pedestal the ideal in womanhood. That it may be a consecrated shrine at which the lofty and noble minded of God's creatures—man—may worship in serenity with hallowed pure impulses. And woman, she should develop strength and moral stamina, grace and perfection, and all requisite attributes to maintain a high moral tone upon a lofty plane that man may be inspired thereby to bow and offer respectful admiration and do homage before the sweet essence of spiritual grace embodied in the physical purity, and intellectual divinity of lovely woman.

If woman's true position were defined and applied, her influence would be high, infinite and endless. Let woman make herself the final judge and arbiter of the good qualities of man, approving and censuring accordingly. Let man aspire to be superior in every qualification to any age of predecessors. One of our popular authors says, "Physical desire fills the world while moral desire improves it." What a sublime thought; to know and to realize that our desires are the true index to our course of action and must guide our energies, passions, joys and sorrows to the very end of time. A writer says, "A waking world is brighter than any dream" and I say, a man who is sincere in his motives, high in his aspirations, faithful to his theories, noble in his thoughts, laudable in his purposes, pure in his practices, is more worthy of respect than is the lavender scented dude whose weak ways and bad practices are so reprehensible, and from whose degenerate tastes the world has so much to fear.

Elevate the standard of manly virtue and integrity, let it be paramount to wealth, or any other heritage.

I not only wish to appeal to conscience, common sense and sober judgment for concurrence in my views, but I wish to touch the finer sensibilities and awaken in the inner moral consciousness an apprecia-

tion of the ideal in womanhood. What would you have your sister to be? Or your sweetheart? Certainly the highest, purest and best of divine in nature. Would you have them robbed of those qualities that make them ideal embodiments of all that you revere in girl and woman. Then apply the maxim, "Do unto others as ye would that they do unto you," and never betray virtue, take advantage of weakness, nor let a sinful passion battle with your reason. Cast out the thought of wrong doing as an abomination—look back with horror upon temptation, and be thankful for the strength and moral stamina that has enabled you to battle with vicious weakness and prevail to your glory and the world's good.

The ideas here expressed should enter the homes of all people because they are of such great importance to one and all alike. I call on every one who has been brought to face the sentence, "Man know thyself," to aid actively by your earnest support to help further the expressed intention of this subject. What more laudable undertaking could engage your interests, help on the good work of elevating morality that the passions may be suborned, and made subservient to virtuous thought, which should fill the mind of every self-respecting man who aspires to equality with his peers, and position as an exemplar of truth, virtue and right. I assert unhesitatingly the greatest curse of mankind is sexual ignorance, and I hope the day may come when we can teach youth the proper conditions of the common and mutual relations of nature, that they may be fittingly observed and thoroughly understood for the wisest practical application thereof; that no one may err through ignorance nor transgress morality through viciousness. The application and practice of a high moral code by man would result in a greatly improved posterity, as our successors. Of the prosperous young man who has erred, his mistakes will be overlooked and criticism smothered under the mantle of success in his worldly undertakings. That course is common, but very condemnable. Young man, the biggest thing in your struggle for supremacy in life, is a sound reputation. No man can enjoy that who has not those qualifications to character such as intellectual finesse, which will enable him to dominate his surroundings and make them subserve his will to do right.

I am afraid that there are some to whom sin might not be so odious were it not for the fear of the consequences. Strengthen your manhood and be honest for honor's sake, elevate your ideals and be virtuous for morality's sake. Do not allow yourself to be actuated by any policy of fear from doing right, but do it unswervingly for principle's sake. If your early indiscretions would only remain the sin

of an hour they would be an evil of great magnitude, but they do not always end with youth, they so often run on for life, and then do not cease, but perpetuate either as a vice or a degenerate principle in posterity.

Think of your vices descending to confront you as a physical infirmity or imperfection of mind in your children. How dear a price to pay for the folly of an hour. What an awful retribution. Think of those far-reaching effects ere you yield to sinful practices or do aught that would endanger you in such an affliction. The sins of the father are descended unto the children even to the third and fourth generation—that is true, and is the real explanation of nearly all crime, deformity, idiocy and lunacy now existing. I hope these thoughts are not tiresome as sound teaching, they embody the highest type of religion, and should be recognized as carrying all our tenents and our most worthy resolves in their application. Each of you will please apply the contained suggestions and observe them in proper spirit and you will be a better man and citizen for the observation. Learn to despise the weakness that would make you fear your passions. Cultivate the forces that enables you to control them. What a high born principle is moral courage, how needed the quality to all success and happiness. Enlarge it by constant practice; you will require it as a reserve force often in the struggle between sensuous man and mind, between reason and passion.

In most every one of the world's great men, the passions have been very strong and imperious, and in nearly every instance they have been controlled by the will and the best of the intellectual in mind has predominated and shaped the destiny of the man, fixing his place in history. Is not this precedent an example worthy of emulation?

SPLENO-MEDULLARY LEUKEMIA, WITH A CASE.*

By Edgar Allen Jones, A. B., M. D.,

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In presenting this subject to you tonight no attempt will be made to go deeply into either the theories of the etiology, or the various conditions in the morbid anatomy, or even into a full discussion of all the symptoms of leukemia for these things would be of no interest to the majority of the members present. The motive of this short paper is to call attention to a disease, which, in my humble opinion, is far more common than is ordinarily suspected, and which presents so many points of interest, especially to the clinical diagnostician. I

*Read before Jefferson County Medical Society March 11, 1901.

will venture the assertion that very few cases have ever been diagnosed in our county, and this fact alone should move us to at least a superficial consideration of its characteristics.

Leukemia has best been defined (Stengel) as: " * * * a disease of hematogenesis, characterized by increase in the number of leucocytes in the circulating blood, and by characteristic changes in the bone-marrow, lymphatic glands, or spleen, or in all of these structures; tending to run a more or less chronic course, and marked by secondary lymphoid infiltrations of various organs."

The disease was first described by Bennett, of Edinburgh, in 1845, and almost simultaneously by Virchow, of Berlin, the latter giving it the name of leukamie (white bood). Some of the earlier observers thought that the condition was one of inflammation of the blood itself, without phlebitis (Bennett), but Virchow recognized it as a disease of the blood-forming organs, and that the white blood (weisses blut") was in reality a symptom of these conditions in the bone-marrow, spleen, or lymph-glands.

As to its etiology nothing of any positive nature is known. It universally distributed, and seemingly, occurs most frequently only in those places where the most careful efforts are made to diagnose every case seen. Race and environment seem to exert no special influence. Leukemia occurs at all ages, but most frequently between twenty to fifty years. It occurs in women most frequently in the fourth decade (from forty to fifty). The lymphatic form occurs more often in children, while the spleno-medullary variety affects adults most. According to Birch-Hirschfield, leukemia occurs about twice as often in men as in women.

Among diseases which seem to predispose to leukemia, malaria seems to occupy first place. In 150 cases studied by Gowers, thirty gave history of malaria, while Osler found a history of malarial infection in about one-third of all his cases. Syphilis seems to have predisposing effect only in the hereditary forms. Probably of most import are various digestive disturbances—chronic gastric and intestinal disorders, stomatitis and pharyngitis have been observed in a large percentage of all cases recorded. Heredity, traumatism, cold, and pseudo-leukemia (Hodgkins) have been observed in some cases as being of probable etiologic influence. Infection has been urged by many observers, but so far no organism has been described.

Theoretically three forms of the disease have been described: splenic, myelogenic and lymphatic. It is now almost universally conceded that only two exist—spleno-medullary and lymphatic.

In spleno-medullary leukemia the spleen and liver are enlarged, some-

times very greatly, and the bone-marrow is affected. I shall simply say that there is a hyperplasia of the splenic substance, with marked infiltration of leucocytes, so that the spleen may appear paler than normal; the enlargement of the liver is due chiefly to infiltration with leucocytes; the bone-marrow reverts to the embryonic type (losing its fat), being chiefly a reticulum of fibrous tissue supporting numerous normo-blasts and myelocytes (both neutrophilic and eosinophilic). The kidneys are frequently infiltrated with leucocytes, as are also the thymus and the thyroid glands. The lungs and heart are usually free from these changes. Only this brief reference must suffice for the pathology of the disease. As to the symptoms: the onset is usually insidious; there is pallor, emaciation (usually late), weakness, dyspnœa after slight exertion, loss of appetite, and indigestion. Moderate elevation of temperature is present in most cases. Headache is quite common. Enlargements of the spleen causing swelling of the abdomen is not infrequently the first symptom noticed. Hemorrhages from nose, mouth and stomach sometimes occur, the latter being often fatal. Priapism is an occasional symptom.

The blood changes are characteristic. There is almost invariably an enormous leucocytosis. It is unnecessary to go too minutely into the blood changes—only indicating the most important. Normally there are about 5,000,000 red cells in cbmm. of blood, and 6,000-8,000 leucocytes. Hemoglobin 100 per cent. Normal ratio of white to red cells is about 1:750. After meals, cold baths, exercise, etc., there is a physiologic leucocytosis which alters the ratio from 1:750 to 1:150 and even 1:100. In leukemia the ratio is usually 1:50, 1:25, frequently 1:10, and even 1:2 and 1:1 and in a few cases the white cells have exceeded the reds.

The red cells are diminished—usually 2,500,000-4,000,000; and the hemoglobin is reduced considerably, giving a low color-index. As to nature of leucocytes. In spleno-medullary leukemia, the characteristic cell, is the myelocyte of Ehrlich. This is a mononuclear, neutrophile (rarely eosinophile) leucocyte; usually larger, and frequently very much larger than red cell. Ehrlich contends that the myelocyte is derived from bone-marrow and is an immature form of the polymorpho-nuclear neutrophilic leucocyte. Myelocytes occur in from twenty to fifty per cent. of all leucocytes in spleno-medullary, leukemia. The lymphocytes are relatively diminished. The eosinophile cells are relatively and absolutely increased. The polymorpho-nuclear neutrophilic leucocytes are absolutely increased greatly, but relatively considerably diminished.

Normoblasts (nucleated red cells) are very numerous, being observed

in almost every field of the microscope. Briefly the blood changes may be described as follows: Oligocythemia, moderate; leucocytosis, enormous; oligochromemia, considerable; color-index, low.

The diagnosis, especially a refined diagnosis, is almost out of the question without the use of the microscope, and suitable stains; with these, in conjunction with clinical symptoms, it becomes quite easy as a rule.

Case. The following case is one of considerable interest, and I regret that I am unable to report the clinical symptoms more fully. Mrs. J——, age 44 years; mother of two children; menses stopped at 41; bad health for several years; first noticed enlargement of abdomen about eight months previous to time of examination. Lately has had severe attacks of vertigo. Has been very deaf for two weeks, deafness coming on suddenly. Physical examination—thorax negative. Abdomen somewhat swollen; spleen greatly enlarged, extending to median line and to level of crest of ilium; liver enlarged below level of umbilicus; no glandular enlargement; marked pallor present; patient very deaf. Examination of blood. Flows freely from puncture; rather light color. Count:

Erythrocytes—3,725,000.
Leucocytes—862,236.
Hemoglobin—32 per cent.
Color Index—1-2. (Marked oligochromemia).

Leucocytes:

Polymorphonuclear neutrophiles—56 per cent.
Myclocytes—40 per cent.
Lymphocytes—2 per cent.
Eosinophilic (polymorhonuclear)—2 per cent.
Normoblasts—very numerous.

CHOLERA-INFANTUM.

By J. C. Johnson, M. D.,

GLEN ALLEN, ALA.

The season most favorable to a large per cent of infantile mortality is now upon us. The relentless Reaper, with his ready scythe, stalks like a midnight spectre hand in hand with intestinal diseases, chief of which is cholera-infantum, and reaps an abundant harvest from the nurseries of our homes; hence my apology for writing this article.

It seems that this disease is not thoroughly understood by a great many general practitioners, for there is no malady recorded in the annals of infantile diseases about which there is more confusion of

ideas in the minds of medical men, except it be diphtheria. Some doctors find cholera-infantum in ordinary diarrhoea, some find it in dysentery with bloody stools, many are sure of it in acute indigestion, and most all country physicians are so awe-stricken when they meet with the genuine disease that they are unable to find a name for the malady.

The limited scope of this article will not permit a detailed account of the etiology of this disease, suffice it to say, there is a diversity of opinions as regards its etiology. Some authors claim it is due to an irritation of the gastro-intestinal mucous membrane, brought about by the presence of retained food products which undergo fermentation in the intestinal canal; some claim that heat and humidity is the sole factor, and refer us to cases of Thermic fever for example. Dr. Holt, in his lectures at the Children's Clinic in the New York Polyclinic, says: "Cholera-infantum is due to the ingestion of improper aliment and other irritating substances which undergo fermentation in the ailmentary tract. It is a disease peculiar to the summer and autumn; occurring mostly in the months of August and September and seeking its victims mostly among the poorly fed infants in the cities—though we do find cases in country practice."

That atmospheric heat is a factor in the causation of the disease, we must all admit without question; for we never meet with it except during the hot season of the year; and, if we can tide our patient over till cool weather he is safe so far as cholera-infantum is concerned. But that heat is not the sole cause of the disease we are equally certain; for well nourished children with proper care and suitable aliment are exempt from the disease, though they be subjected to the same atmospheric influence and the same environments of those who have not proper food and take the disease.

With these facts before us, we must conclude that heat and improper aliment are the factors necessary to the production of the disease; and in the writer's opinion a microbe does the rest. Heat reduces the vitality of the infant and impairs its digestive powers; improper food irritates the weakened gastric and intestinal mucous membrane, and retained food products undergo fermentation in the intestinal tract. Now, an irritated mucous membrane, bathed in this fermenting substance brings about a condition favorable to the production of pathological germs, (waiving the probability that the microbe is not a factor in producing the irritation and fermentation). These germs in turn produce their poisonous ptomains which so profoundly shock the entire system of the little sufferer. The tyrotoxicon found in milk that is kept in sour cans, and in "souse" meat which has been

stored away in tin cans while hot, produces symptoms identical with cholera-infantum. Whole neighborhoods have been poisoned on ice cream at picnics, and the ice cream venders have been arrested, in some instances, for selling poison cream, when it developed that the mischief was due to a germ found in the milk.

The tyrotoxicon may be responsible for many cases of cholera-infantum, especially among artificially fed infants that are fed on milk that has been stored in sour cans.

Symptoms. Cholera-infantum, as its name implies, is cholera in the infant, and no other disease has so striking a likeness to Asiatic Cholera. The disease is vigorous in its onset and rapid in its course. Nothing will so quickly reduce the vitality of the infant as will this disease. The child may have had or may not have had a diarrhoea to begin with; but when cholera-infantum announces itself the symptoms are all the same. It is not unusual for the infant who has just been jumping and "crowing," to the delight of its mother, to be suddenly seized with vomiting and purging, and in a short while develop symptoms frightful to the family and alarming to the physician, when he arrives. The vomiting and purging become synchronous and continue till the contents of the stomach are exhausted; but retching and nausea continue unabated. The dejections from the bowels, fecal at first, soon become so thin and watery as barely to stain the napkin. In a very short time the child is so reduced that those who knew it a few hours ago fail to recognize it now. The child looks old; the skin is wrinkled and lies in folds. The general surface of the body is covered in cold sticky perspiration; the extremities are cool, but the head is extremely hot, and the thermometer in the rectum registers 105° to 106° F. The eyes are sunken in their sockets over which the lids no longer close; the lips are retracted and no longer conceal the teeth or gums; the features are pinched, the head rolls from side to side on the pillow, and the patient utters feeble plaintive cries; the above symptoms added to extreme thirst and restlessness make up a very good picture of true cholera-infantum.

Treatment. Prophylaxis in this disease, as in all others is the best treatment. If we could educate the mothers to exercise an intelligent care over her infants we would sign less certificates of death due to cholera-infantum. We should educate the mother to avoid the weaning of her child during the summer months, if possible. Should the child be weaned or artificially fed, that diet should be adopted which mostly resembles the mother's milk; and in the writer's opinion cow's milk is the best available substitute for the mother's milk. This should

be taken fresh (the upper third of the milk most desired) and sterilized. The milk should be kept on ice after sterilizing until just before using, when it should be heated to about 70°F. If bottle fed, the bottle should be kept clean and sweet. A solution of ordinary baking soda in water is the best agent for cleansing, as it neutralizes any acid which may originate from particles of milk retained in the bottle. Medical treatment. As we recognize this disease to be microbic in some of its phases, if not in its origin, medical instinct teaches us that intestinal antiseptics are indicated in the treatment, and they must be employed if we cure the patient. But this is one disease in which I have been forced to treat symptoms before I could exhibit remedies to remove the cause. Antiseptics act too slowly, even if they could be retained; the patient is sinking rapidly and everything, even to the least drop of water when swallowed is promptly ejected. Calomel which acts so kindly in ordinary vomiting when given in small doses will not avail us here, even when given dry on the tongue it will be ejected even if swallowed—no sedative given per orem will suffice in many cases. What are we to do? Must we stand powerless and let the Monster take the jewel from the mother's heart? There is one remedy and only one so far as an experience of ten years has taught me, and that remedy is Sulphate of Morphine and Atrophine. This may seem like heroic treatment, as children sometimes bear opiates badly, but we must remember we are having to deal with a formidable disease, therefore, we must use formidable weapons to combat it. 1-50 gr. Morph., 1-300 gr. Atrophine hypodermically can be well borne by an infant of six months old with this disease, and may be safely repeated in thirty minutes if necessary. I seldom have to repeat the injection and have never had any but the happiest resul from the treatment—under its use the vomiting ceases, the extremeti warm, restlessness subsides, and a hopeful outlook is the result. Now I can use remedies to remove the cause of the disease. I usually ge good results from the following:

℞

Mistura Cretae ℥iiss.
Listerine ℥iv.
Mx. Sig: A teaspoonful every fourth hour.

or

℞

Glycothymoline (Kress) ℥iiss.
Mistura Cretae qis. ad. ℥iii.
Mx. Sig: Teaspoonful every fourth hour.

℞

Bismuth Subnitratis ʒss.
Zinc Sulpho carbolas grs. v.

Mx. ft. pulo. No. 10, Sig: Alternate with either of the above. Pepsin and Lactopeptine to assist digestion, brandy mint julip and diet are all necessary.

MUCOUS DISEASE.

Mucous disease as characterized by an irregularly occurring profuse discharge of mucus from the intestinal tract, accompanied by more or less marked nutritional disorder. The etiology is referred to an inherited tendency, either the lithemic or neurotic diathesis. It sometimes follows pertussis, but more commonly severe diarrheal disease. There is an increased tendency to the formation of mucus in this disease, and at intervals a discharge of large masses of this substance. The child will present symptoms of malnutrition. The skin is dry and scurfy. There is frequently nausea and vomiting, the appetite is irregular. Tympanitis is present. The sleep is restless and disturbed, there is a change in the disposition of the child, loss of memory, irritability, etc. The urine is scanty and high colored, containing an excess of urates. A few days before the attack the bowels are constipated, the breath is offensive and nervous symptoms are marked. There may be dull pain in the region of the umbilicus and evidences of prostration, but there is no fever. Tuberculosis is the only condition with which mucous disease is likely to be confused, and this can be excluded by the absence of fever. Treatment should be directed toward the lithemic condition and lessening the excessive mucous secretion. Food and hygiene should receive attention. For the relief of the mucous accumulations the bitter tonics are indicated. Nux vomica is the best of these. A combination of pepsin, bismuth and strychnia is useful, as the stomach shares in the run-down condition of the rest of the body. During the period of constipation, sodium phosphate combined with sodium sulphate acts not only as a cholagogue, but tends to liquefy the mucus. A combination of hydrastis and sanguinaria acts not only as a bitter tonic, but has a direct stimulating effect on the intestinal glands. Arsenite of copper has an antiseptic action, and is sometimes used with advantage.—Barbour, Amer. Pract. and News, July 1, 1901.

Selected Articles.

SUBPHRENIC ABSCESS IN ITS RELATION TO SOME COMPLICATIONS.

By J. Mc. F. Gaston, Jr., A. M., M. D., Atlanta, Ga.

Independent of the morbid changes in a known area, another syndrome of symptoms project themselves on the field, and we know we have a complication to deal with. In recent literature, appendicitis, Douglas' abscess, and neurasthenia are associated with suppuration in the abdominal cavity. Pelvic complications are very difficult to differentiate from appendicitis, and at a recent meeting of the Southern Surgical and Gynecological Association a large number of cases were reported. The discussion that resulted was especially interesting, in that the subject of appendicitis in the female was found to be a comparatively frequent complaint.

The relationship between the occurrence of appendicitis and the presence of a neurasthenic tendency is also receiving attention.

Subphrenic abscess is closely associated with empyema and pleurisy, and a close examination of the patient is never complete without palpation of the organs of the abdominal cavity, as well as auscultation and percussion of the chest.

The perception of fluctuation is a most important aid in diagnosis. In hepatic abscess a great point is gained when a peculiar wave-like motion can be detected at the point of the finger held between the eighth and ninth ribs, and a tap or two is given with the fingers of the other hand at the umbilicus.

J. Marion Sims has called attention to this, and to the peculiar melancholia associated with incipient disease of the liver, resulting in abscess, in remarks made by him before the Medical Society of Virginia, Oct. 25, 1879.

The diagnostic points depend, in a great measure, upon a very careful observation of each symptom as it arises, and a co-ordination of the symptoms pointing to hepatic abscess. All of these troubles are not so difficult to discover alone, but when combined may be a source of considerable perplexity to the surgeon.

Two cases of some unusual perplexity have been operated upon by me. A short abstract of one will be given as it has been published in the New York Medical Record, under the title of "Subphrenic Abscess as a Complication of Appendicitis."

On June 3, 1900, I was asked by Dr. J. W. Carmichael to see W. E. F., aged 32, and examine him with reference to pain in region of appendix. Dr. W. Monroe Smith had seen him when he was first brought home, and administered a hypodermic of morphia, grain 1-4, with atropine, grain 1-150. At 7 a. m. his temperature was 100 2°F., respirations 26, pulse 100. His general appearance gave evidence of a strong, robust man, prostrated by some serious complaint. The following prescription was given:

℞ Ungt. belladonnae ..... ℥j
Pulv. camphorae ..... ʒj
M. Sig.—Apply to abdomen, and cover with oiled silk.

He had already received a large dose of calomel, which was now followed by a tablespoonful of Epsom salts. His condition betokened a fulminating appendicitis, and he was accordingly watched carefully; his temperature, pulse and respiration noted every half hour. All preparations for an operation were made. He received morphia sulphate, grain 1-4, with atropia sulphate, grain 1-150, hypodermically. His pulse was accelerated and pain became intense. Two tablespoonfuls of castor oil, with spirits of turpentine, one teaspoonful, were administered without results. The operation was performed in the afternoon, with the assistance of Drs. Smith, Carmichael and Gaston, Sr., A. C. E. mixture was administered. The parts were shaved, cleansed with soap and water, solution of carbolic acid and ether. An incision was made one and a half inches long over the tumor in the right iliac region, near the border of the rectus muscle. It was enlarged later to nearly three inches. The fibres of the transversalis and rectus muscles were separated by the fingers, and in the aponeurosis an aperture was made for a directory to guide the scissors in cutting. The peritoneum was opened in same way. A small amount of dark fluid was found. A large piece of omentum was ligated with cat-gut and removed. The appendix was tied with silk and cut with scissors. A portion of tissue near the appendix was excised, the stump treated with carbolic acid and replaced. The appendix was gangrenous, and contained one enterolith. The peritoneum was wiped with peroxide of hydrogen, irrigated with normal salt solution and hot water. The wound was then closed except at lower angle, to allow for gauze drainage. Patient was placed in bed, and received a hypodermic of strychnia nitrate, grain, 1-30. At 7:30 p. m., temperature 101°F., pulse 95, respirations 21. The ointment was continued. No morphine or water were allowed. Another hypodermic of strychnia nitrate, grain 1-30, was given at 11:30 p. m., when his temperature was 99.8°F., pulse 105.

A quantity of bile was vomited, the respirations were hurried, and at 10 p. m. his pulse was 95, and temperature 100.2°F. He received every hour a tablespoonful of the following:

℞ Lime water ..... ℥iij
Peppermint water ..... ℥j
Camphor water ..... ℥ij

Diffuse peritonitis seems to have existed. The tongue was red and raw, while the respirations were irregular, accelerated and spasmodic. The pulse was the chief danger signal. Frequent dressings were used, and free drainage secured. Occasional small doses of calomel were given with resulting free discharges and relief. Sterilized gauze was used as a drain from the stump. Dioxide of hydrogen was continued four weeks. Sublimate gauze was substituted for sterile gauze on the third day. Dressings were made twice daily.

Iodoform gauze was packed into the wound on the tenth day. Upon remembering the fluctuation in the sub diaphragmatic region it was thought necessary to re-open the wound and drain. A complication of sub phrenic abscess was evident. The pyogenic membrane and pus finally escaped at a dressing. Milk was allowed as nourishment. An anodyne was given for the pain. Tonics, like elixir of iron, quinine and strychnia, tincture of cinchona comp. and strychnia nitrate tablets were given. Enemata of magnesia sulphate to obtain movement of bowels.

A large colon tube was used very satisfactorily.

The above complication in appendicitis is rare; Baldwin's cases make the forty-fourth and forty-fifth. Many cases were not diagnosticated until after death. Pathological examination shows an intra and extra-peritoneal variety.

In Baldwin's cases the first operation was performed on June 6, 1899, and not until July 20, 1899, did the abscess appear. After incision immediately below the twelfth rib, an enormous amount of pus from a large cavity with ragged edges escaped. The cavity extended up toward the diaphragm above the liver, and closed in six weeks.

The second case was operated upon on July 26, 1899, and again on August 28, 1899, for abscess. The cavity was about the size of an orange, somewhat ragged interior, which was washed out with a counter opening for drainage. It was packed with gauze, and closed in two weeks.

In my case the symptoms were, evidently from the start, due to abscess because of fluctuation and rapid breathing. A channel, so to speak, was opened by the cutting away of the adherent omentum dur-

ing operation for appendicitis. The discharge came from direction of the diaphragm, as evidenced by an increase when patient coughed or on deep inspiration. The outcome was peculiarly fortunate, not requiring another operation. As a probable cause of this abscess, the patient gives a history of injury of this region some months before.

The other case was one of hepatic abscess, which was aspirated and seemed to be relieved temporarily, when symptoms of empyema seemed to appear, and death followed.

These were men.

Another still was in the person of a lady, and has not been reported. Drs. J. C. Olmsted and J. McFadden Gaston, Sr., treated this case. There was an abscess in Douglas' cul de sac, complicated with abdominal organs. Free irrigation and antiseptic treatment resulted in a cure in this lady.

But before the abscess ruptured, grave doubt existed as to its origin: whether in the appendix, or whether the pus came from the tube.

In a patient which I attended some years ago, a similar abscess was discharged through the uterus after every symptom of gall-bladder obstruction, with jaundice and finally typhoid fever. She recovered entirely, and afterwards bore a healthy child, and never had a recurrence of either trouble.

It is well to consider the presence of retro-peritoneal abscesses, when an incision in the lumbar region has been suggested, as in these cases the dangers arising from peritonitis, and a migratory infection, are less than when the peritoneal cavity is invaded. It is evident that in the great diversity of conditions we should consider carefully, and I might say prayerfully, each individual case.

At times simply a tuberculous deposit is found on the appendix, and then we have very little more to do than to excise this diseased portion of the appendix. But in the great majority of cases an enterolith is encountered, and there is a process of gangrene which begins in the mucous membrane of the appendix, and spreads to the confines of the mesentery and ends in perforation of the muscular and serous coats of the appendix.

As appendicitis is a disease associated with so many complications is it not wise to investigate thoroughly the nervous system, the lymphatic system, and the digestive and alimentary canal, before determining the means of relief to be adopted?

All pains in the region of the appendix are not due to appendicitis, and it is equally true that we may have a long continued abscess of the liver without any apparent enlargement of the liver or pain.

In the paper of Dr. J. Marion Sims,which has been already mention-

ed, he details a case in which the eminent neurologist, Dr. William A. Hammond, had formed a diagnosis of abscess of the liver from the symptoms of hyperemia of the brain, and had afterwards made a physical examination which was not entirely confirmatory, and which sufficed to cause an exploratory aspiration, with the evacuation of a quantity of pus (fifteen and a half ounces). The general health and mental condition of the patient at once improved, and he remained well after this, suffering only from previous paralysis.

"Dr. Hammond aspirated the liver twenty-six times in the last two years," said Dr. Sims in 1879. One of his patients was Dr. E. S. Gaillard, and nearly all the cases were in men who had undergone great mental exertion. In fifteen cases he evacuated abscesses, and effected cures. In eleven cases the operation was unsuccessful, but attended with no ill effects whatever. Dr. Hammond was in the habit of passing the aspirating needle through the intercostal space between the eighth and ninth ribs, at a point about an inch in advance of a line drawn from the axilla to the pelvis. Drs. W. E. B. Davis,* Joseph Price,† W. Gill Wylie, and many others, as early as 1900, endorsed Taits' ideas of operative treatment for peritonitis, having first used saline cathartics in great quantities. In suppurative peritonitis particularly is an operation indicated with the evacuation of pus, wherever located. The earlier that the operation can be undertaken in all such cases, the better are the chances of recovery. I wish to give some of my own personal observations in this couple of rare cases. One symptom that may prove of distinctive importance bearing upon a diagnosis between hepatic abscess and subphrenic abscess, is that the diaphragm may be pushed upward in hepatic abscess, while in subphrenic abscess proper we may have the stomach pushed down and the intestines pressed forward. The most common and striking accompaniment of suppuration in any part of the body is a variable temperature and rigors.

In one case reported by Lees and Pepper, the temperature had reached 106°F. The symptoms pointed to an abscess near the stomach, but upon incision, as in gastrostomy, no pus was found, but the stomach had a lymph matting its walls to the intestines.

It was by aspiration in the seventh interspace, on the left side, that pus discovered, and this was found to come form below the diaphragm which had been penetrated by the needle.

In hepatic abscess we usually find hurried and abdominal respiration; while in subphrenic abscess there is slower respiration, but it is mostly confined to the thorax.

The pulse rate, or rather, heart-beat, per minute is slower than nor-

*Read before the Medical Association of the State of Alabama, April 13 1890.

†Medical News, August 9, 1890.

mal in hepatic abscess, owing to great pressure upward upon the heart, and to the left upon the abdominal aorta and the iliac vessels.

In hepatic abscess we may notice a displacement of the right lobe of the lungs, but in subphrenic abscess more particularly, the stomach, spleen and kidneys. We may have no means of differentiating these two affections, as to their side, as we have in appendicitis. But right hepatic abscess is far more commonly met with than abscess of the left lobe of the liver.

Empyema is usually unilateral, but we may have double empyema. At the same time in empyema we will usually find when it occurs on either side, a destruction of the vocal fremitus on the side affected, and displacement of the heart when empyema is on the left side. The complication of the two conditions must also be looked into, as pus may have burrowed through the diaphragm.

It is an important diagnostic device in empyema to observe the influence of gravity upon the collection of fluid in the pleural cavity. In the event the pus gravitates to the left side when the patient is put on that side, and no dullness exists on the right side, the strong presumption would be in favor of a unilateral empyema of the left pleural cavity.

When we see no change wrought by lateral position, or by placing the patient in an upright posture, then we suppose there may be a confusion arising from two sources, viz: (1) A tense and unyielding pyogenic membrane with adhesions of the pleural, and again, (2) a consolidation of lung.

Subphrenic abscess, we are told by Curtis, has been traced to every organ of the abdomen. Curtis* gives a slightly different method of differentiating affections of the liver, lungs and pleura, from subphrenic abscess. He advises that in percussion and auscultation, the examining physician note whether there is a cavity upwards or downwards in the area of dullness, and naturally suggests that the diaphragm will be domelike in subphrenic abscess from pressure upward, and a reverse condition or shape by pressure downward, in empyema.

TREATMENT.

Subphrenic abscess should be treated by early incision and drainage. Aspiration in this locality is not a safe procedure on account of the dangers of perforating the hollow viscera. The organ that gave rise to the abscess may be examined, and if any ulcer has perforated the stomach or abdomen the opening should be closed by suture.

Advantage of free drainage after operation is greater from the elevation of the head, and shoulders, and hips. This process is now very

*Twentieth Century Practice of Medicine, Volume VIII, pages 487-8-9 and 480.

highly endorsed by Fowler in his treatise on"Appendicitis," in his revised edition.

Normal salt solution and peroxide of hydrogen are useful agents in irrigation of the abscess cavity, both during and after the operation, for evacuation of its contents.

Capt. W. C. C., aged 59, came from Montgomery Ala., during a bad epidemic of yellow fever.

Abscess of the liver was suspected by his physicians, Drs. Wilkinson and J. B. Gaston. In the effort to flee from yellow fever he came to Atlanta, and a letter from Dr. J. B. Gaston showed that it had been their intention to aspirate. He was put under the care of my father, Dr. J. McFadden Gaston, and myself, Oct. 21, 1897.

Upon examination the liver was found very much enlarged, and a diagnosis of hepatitis was formed. With the strong hope of relieving his immediate symptoms we put him on a prescription of

℞ Massae hydrargyri .....gr. xx
Podophillin .....gr. ij
Pulv. rhei .....gr. xxx

M. Divide into capsules, No. 10. Sig.—Take one every other night.

Another prescription, for external use, was given at the same time:

℞ Ung. hydrargyri .....
Ung. belladonnae .....
Ung. iodidi .....
Ung. camphorae .....aa ℥ij

M. Sig.—Rub well under margin of ribs. Cover with oiled silk.

On October 23, he was quite restless, and was given a combination of bromides of sodium, ammonium, potassium, lithium and calcium in teaspoonful doses in water.

Next day his pulse was 48, and very weak. Chest measured 16 1-2 inches on the right side, in the semi circumference from the ensiform cartilage. Temperature was 100.4°F. The left side measured 17 inches as described for the other side. A total circumference of 33 1-4 inches, and 3 inches lower, 15 inches on right and 18 inches on left—total 33 inches.

It will be observed that the bulging occurred below the ensiform cartilage, and very similar to a case of subphrenic abscess (Stockton).

On October 26, the temperature was 100.2°F. at noon, and at 5 p. m. 100.6°F. Pulse 72. Measurement of left side, as before, 17 3-4 inches; right side, 17 inches; 3 inches below measured 18 inches and 17 1-2

inches respectively. A greater distention on the left side was somewhat unexpected, but might be accounted for by pressure of organs to that side by the pus situated on the right side.

On October 28, an alterative mixture containing liq. arsenni et hydrargyri iodidi was prescribed.

As an additional hepatic derangement continued, and profuse sweating occurred at night on November 5, the use of the following was indicated:

℞ Acidi nitro hychlorici ..... ℥ij
Aquae distillatae ..... q. s. ℥ij
M. Sig.—Take a teaspoonful in water, every six hours.

On November 13, the following combination was given for aiding expectoration, and as a general stimulant to the respiratory organs:

℞ Ammonii carbonatis ..... ℥j
Olei terebinthinae ..... ℥j
Syrupi tolutani ..... ℥j
Aquae camphorae ..... ℥ij
Mucilag acaciae ..... q. s. ℥vj
M. Sig.—Take a tablespoonful every two hours.

On November 20, his temperature was 100°F.; pulse 90; breathing clearer on both sides.

Morning temperature 99°F., pulse 120, respiration 36; evening temperature 99°F., pulse 110, respiration 32. The right side was somewhat dull; flatness was noted on percussion of the left side. On this day a prescription, to combat the symptoms of pain and difficult breathing, was given, as follows:

℞ Hydrarg. chloridi mitis ..... gr. j
Pulv. ipecac et opii .....gr. xxx
Quiniae sulphatis ..... gr. xxx
Pulv. camphorae ..... gr. j
M. Divide into capsules, No. 12. Sig.—Take one every night and morning.

After these were given his condition seemed better, with a normal temperature; especially was the left lung clearer of mucus; no liver dullness below ribs; puncture of aspirator under ribs had healed, and at 5:15 p. m., temperature 99.6°F., respiration 32, pulse 96.

November 22, 5 p. m., temperature 98.7°F., pulse 90, respiration 32; 12:30 p. m., temperature 98.4°F., pulse 100, respiration 34. When asleep his respiration dropped to 19; he sweated a good deal; at one time his respiration was 18 while asleep; the tenderness over the median line is considerable.

Percussion reveals dullness over median line; no pain or suffocation was noted in the region of the lungs.

November 23, his weak condition necessitated an effort to build up his system, and he was put on an iron tonic in full doses; 5:30 p. m., temperature 98°F., pulse 90, respiration 36. At 10 p. m. his temperature was 98°F., pulse 80, and respiration 40.

On November 24, at 1 p. m., his pulse was 60, and weaker, his temperature 97°F., while the respiration was not taken; the temperature, later in the afternoon, was 96.8°F., pulse 80, and respiration 40.

November 25, 2:30 a. m. Being called out at this hour of the night his temperature was not taken, but his pulse was 100, and feeble; respiration 48. A teaspoonful of the tonic was given, also a hypodermic injection of 1-25 grain strychnia nitrate with 1-8 grain of morphine sulphate. Before leaving, his respiration had been reduced to 20 per minute. He died at 6:30 a. m. His respiration had again reached 48, while temperature was 95°F., when seen shortly before the end. His condition was very much improved by the relief of pressure afforded by an operation performed two weeks before his death.

Aspiration was first performed in the region of the liver below the ribs by my father, Dr. J. McFadden Gaston. The aspirating needle was clogged with blood, and no distinct evidence of whether the needle touched the focus of pus was obtained. He was put under the anesthetic for the second time, and I inserted the needle into the interspace between the eighth and ninth ribs, when a quantity of pus was drawn off, estimated at a pint and a half.

The pus was examined microscopically by Dr. F. S. Bourns, who was then pathologist of the Southern Medical College. The evidence of liver cells was sufficient, and various streptococci were found in the pus.—St. Louis Courier of Medicine.

BEWARE OF SILK NEXT TO SKIN.

Translated from the Russian by George I. Bluhm, M. D., San Francisco.

Dr. Jolles, of Vienna, reports a case of poisoning by zinc in consequence of wearing silk stockings.

Mrs. S. G., 27 years of age, on April 20, 1900, consulted Dr. Oesterreich for paralysis of the left lower limb. Similar manifestations, namely, disturbance in motion and sensation, also feeling of coldness, she experienced on previous occasions too. Before each attack the patient noticed that the soles and sides of her feet were colored yellow. Examination of the patient revealed the sweating of the extremities, and that the feet were covered with yellow dye. The doctor forbade

her to wear the yellow-reddish stockings which she wore at the time, remarking that the absorption of the dye, if it is not a direct cause of her sickness, can aggravate symptoms. The pathological condition of the affected limb manifested itself in incoordination, alternate sensation of heat and cold, lessening and absence of sensibility. It was ascribed to hysteria. Under the influence of sodium bromide and faradization the above symptoms have quickly disappeared, only leaving some feeling of heaviness in the extremities. Examination of urine on April 27, negative. No albumen or sugar. All summer patient felt well. Towards fall she commenced to feel worse again, and in September incoordination of both lower limbs developed, especially in the left. Then the case was turned over to Dr. Jolles for special investigation (1) of her stockings which she wore prior to her sickness, and (2) her urine. He found zinc chloride in the dye of the stockings, and urine laden with albumen, also some casts. At the second examination the patient was very much emaciated, pupils of the same size and reacted to light. The stomach was dilated. With the eyes shut she staggered very much in walking. The reflexes, of the knees especially, were somewhat exaggerated; coordination very difficult; opthalmoscopic examination of the retina negative.

Diagnosis: Nervous disturbance of coordination, and albuminous urine as the effect of the protracted poisoning by zinc. Patient was put on a milk diet. In eight days the amount of albumen in urine decreased. To improve the emaciated condition, lean meat, ham, vegetables, milk, and light farinaceous dishes were ordered. On October 26 left for Baden for sulphur baths. In two weeks she could walk about ten steps. After ten weeks' treatment with baths almost all the symptoms disappeared.

The above case is very instructive, as it teaches us not to wear silk clothes next to the skin, especially persons that perspire easily. It is worth remembering that in order to give the silk a certain weight, especially to those of light color, zinc chloride (Zn. Cl.2) to the amount of 25 per cent. is used.—Pacific Med. Journal.

MEMORIAL TO DR. SKENE.

A monument will be erected in Brooklyn to the memory of the late Dr. Alexander J. C. Skene, at a cost of $25,000. Dr. Skene was a man of great eminence, and well-known to the medical profession all over the world.—Am. Med.

Editorial.

JNO. C. LeGRAND, M. D.,.....Editor and Prop.

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We cannot promise to furnish back numbers.

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The editor is not responsible for views expressed by contributors.

All communications should be addressed to THE ALABAMA MEDICAL JOURNAL, Birmingham, Ala.

Birmingham Depot.

The L. & N. Railroad is the best railroad system in this country. As a rule this road meets all the reasonable demands for the convenience and health of the traveling public. The cars are clean. The service first-class. The conductors are courteous and painstaking. The attendants are as a rule polite and attentive. Those who find pleasure in traveling on a railroad car will find that the L. & N. company seeks to anticipate every requisite to this end.

But conditions and arrangements for reaching the train at Birmingham depot are, to say the least of it, at times, altogether unbearable and intolerable. We are not sure where the fault is, or what system of road is to be held accountable for this condition of affairs. With the rapid increase in population of Birmingham, and as a consequence

the increase of patronage of the railroads at this place, there should be better facilities for gaining access to the several trains. A small gate and narrow passage way to the gate, bound up with iron bars, through which every one must pass to reach the gate in order to have his ticket punched, is inadequate,and is getting to be more and more intolerable. It is an every day occurrence that men, women and children—people of every race, tribe, color and condition—are packed and jammed into this narrow passage, trying as best they can to get to the train. Women, nervous, anxious and excited, are shoved aside by drunken men and negroes, children are packed in by these careless, discourteous men and roughs. The procession files in hour after hour during the day and night.

To prevent serious accidents and to meet what we believe to be a reasonable demand on the part of the traveling public and for the safety and comfort and health of the people who so liberally patronize the railroad at this point, we believe that there should be better facilities for reaching the trains. There should at least be one gate for the white people and one for the colored, and, if possible, one for the toughs.

We call the attention of our railroad friends to this matter, with the hope that they will grant the small request in the interest of the public at this place.

Sectarianism.

Sectarianism in medicine has always been a general scandal and the subject of much satirical comment on the part of the lay public. But there is at present a decided tendency on the part of the medical profession to obliteration of school distinctions, which means a union of class interests and a disappearance of prejudice. From what direction the approach has come is not evident, but we believe that the disappearance of homeopathy from among the homeopaths has removed the element of repulsion and attraction has thus become in a measure involuntary. It is very certain by way of proving this proposition that the regular school has not adopted homeopathic principles and methods. The sentiment that if a beast be lord of beasts his crib shall stand at the king's mess has always animated a large number of the so-called regular profession and they stand ready and willing to adopt that which is good whatever its origin. If this constitutes the basis of fraternal union, there will be no complaint from any quarter.

We are not prepared to admit that the regular profession is convinced that there is much of merit in the methods of the homeopaths,

as is suggested by our worthy contemporary, the Atlanta Journal-Record of Medicine, in the above paragraph. The advance in medicine, made by the regulars, is crowding out all forms irregular.

The Glove as an Infecting Medium.

While witnessing an operation at St. Vincent Hospital by one of the best surgeons recently, the question of gloves or no gloves was mentioned by those present. One physician said he would not use them. In noticing this incident, our attention is directed to the notice on the subject in an editorial in the Pacific Medical Journal:

The surgeon cannot be too careful about his gloves. After operating upon septic cases it is exceedingly difficult to render the hand again aseptic for some time. Hence the advisability of wearing rubber operating gloves in septic cases. The surgeon is very apt to wash his hands with less care after an operation than before, and going from his operating room into his buggy or carriage draws on his driving gloves or out-door gloves, which, in turn, rapidly become infected with staphylococci, streptococci, etc., so that for days or weeks the surgeon's hands are reinfected by means of his own gloves. The same occurred some years ago to an obstetrician in whose practice several cases of puerperal fever arose. After most careful investigation and giving up his obstetric practice, it was found that his driving gloves had been contaminated by his own hands from a case of scarlet fever he had treated some time previously. We would urge the necessity of wearing surgeon's gloves at all operations having pus, and we would suggest that the surgeon does not wear out-door gloves for several days after a septic operation, so that the air and sunshine with the natural attrition of the skin, will destroy the infection, and not communicate it to the glove which may in turn reinfect the hands for days and weeks thereafter.

Association Meeting.

The American Association of Obstetricians and Gynecologists will hold its fourteenth annual meeting at the Hotel Hollenden, Cleveland, O., Tuesday, Wednesday and Thursday, September 17, 18 and 19, 1901, under the presidency of Dr. William E. B. Davis, of Birmingham, Ala. The committee of arrangements is composed of Dr. M. Rosenwasser, 722 Woodland Avenue, and Dr. William H. Humiston, 122 Euclid Avenue, Cleveland, either of whom may be addressed concerning rooms or other local information regarding the meeting.

Among those who will read papers are the following:

1. The President's address, William E. B. Davis, Birmingham.

2. Indications for the combined vagino-abdominal operation of hysterectomy, Rufus B. Hall, Cincinnati.

3. Title to be announced, Henry D. Ingraham, Buffalo.

4. A method for suspension of the uterus, Robert T. Morris, New York.

5. Tubercular peritonitis, experimental and clinical, John B. Murphy, Chicago.

6. Report of a case of acute pancreatitis and fat necrosis, Edward J. Ill, Newark.

7. Pelvic and abdominal tumors complicating pregnancy, with report of cases, Rufus B. Hall, Cincinnati.

8. Pathology and treatment of hourglass stomach, with report of two cases, Charles G. Cumston, Boston.

9. Early operations in appendicitis and method, Joseph Price, Philadelphia.

10. Title to be announced, J. Henry Carstens, Detroit.

11. The undeveloped uterus, C. L. Bonifield, Cincinnati.

12. An interesting case of tubo-abdominal pregnancy, Wm. H. Humiston, Cleveland.

13. Title to be announced, Walter B. Dorsett, St. Louis.

14. Title to be announced, C. C. Frederick, Buffalo.

15. Report of a case of ruptured tubal pregnancy, Webb J. Kelly, Galion, O.

16. Diseases and injuries of the cervix uteri and their treatment, Joel W. Hyde, Brooklyn.

17. Title to be announced, L. H. Dunning, Indianapolis.

18. Title to be announced, James F. W. Ross, Toronto.

19. Extrauterine pregnancy; report of cases with specimens, George S. Peck, Youngstown.

20. Is Cesarean section justifiable in placenta previa? E. Gustav Zinke, Cincinnati.

21. Title to be announced, Edwin Walker, Evansville.

22. Some reflections on ectopic gestation, David Tod Gilliam, Columbus.

23. Some forms of disease involving the uterine appendages, Augustus P. Clarke, Cambridge.

24. The mechanical, or combined plastic and mechanical treatment of retrodeviations of the womb, M. Rosenwasser, Cleveland.

25. Title to be announced, H. E. Hayd, Buffalo.

26. New method of opening the abdomen in gynecological surgery, Charles G. Cumston, Boston.

27. A second contribution to the surgery of gastric ulcer, Henry Howitt, Guelph, Ont.

NEW ORLEANS POLYCLINIC

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Miscellaneous Notes.

Dr. Charles R. Sexton is spending a few weeks in New York.

Statistics indicate that suicides and divorces are on the increase.

Dr. J. P. Kennedy has been elected Health Officer of Atlanta, Ga.

Dr. J. W. Crump, of Steel's Depot, Ala., died on April 25th, aged 55 years.

Dr. W. L. Heflin, of Roanoke, Ala., is spending several days in the city.

Dr. George S. Brown spent a few days at Blount Springs during the month.

Dr. R .S. Hill, of Montgomery, is resting for a few days at Blount Springs.

Dr. Mobley is taking a vacation at the Stafford Springs, in Mississippi.

Dr. Floyd W. McRae, of Atlanta, Ga., is spending several months in Europe.

Don't fail to read the Medical College announcements in this issue of the Journal.

Dr. Cunningham Willson is resting for a week in Blount county, on the banks of the Warrior, fishing.

Dr. Doly, of Pittsburg, who a few weeks ago committed suicide, is said to have been worth $250,000.

Six hundred and ninety-six is the number of degrees in medicine granted by the university of Paris for 1900-1901.

A true and genuine sense of gratitude to a friend or friends is one of the noblest characteristics of a big man.

The Southern Surgical and Gynecological Association will meet in the city of Richmond, Va., Nov. 12, 13 and 14, 1901.

The Tri-State Medical Society of Alabama, Georgia and Tennessee will meet in the city of Chattanooga, Tenn., Oct. 12, 1901.

The medical societies in Alabama are especially requested to send the proceedings of meetings to this Journal for publication.

A large number of young men who make application for admission to West Point are refused on account of physical disqualifications.

Drs. Davis & Davis are making extensive improvements at their infirmary. The work will soon be completed and they will be ready to open and receive patients by the first of September.

It is reported that a negro woman at Decatur, Ala., gave birth to a child having only stumps for arms and legs. During pregnancy she witnessed the amputation of the limbs of a child that had been crushed by a locomotive. Will Dr. Parke and others explain the phenomenon?

A minister of the gospel or a church or a church paper which one day endorses and extols the scientific investigation and research made by the regular medical profession, and the next day gives a helping hand to so-called Christian scientists, and other forms of charlatanism, needs to be shown the error of their way.

The doctors of Alabama are requested to send their contributions on medical subjects to this Journal. We hope that no physician in this State will wait for a personal request from the editor, but will feel that the Alabama Medical Journal is his to command and not hesitate to send papers, report of cases, etc., to us for publication.

A doctor should be broad, liberal, conservative, kind, earnest, faithful and honest in his treatment and bearing towards the members of the medical profession. Dr. Gould, very correctly says: "Imper-

tinently present, vanity and self-consciousness will destroy the power and value of a man's work no matter how good it may be in other respects."

Convulsions may frequently be cut short, like magic, by teaspoonful dose of Celerina repeated at short intervals. The nausea as an after-effect of chloroform, or other narcosis, may generally be controlled in the same manner.

The preparations of "Pepsin," made by Robinson-Pettet Co., are endorsed by many prominent physicians. We recommend a careful perusal of the advertisement of this well-known manufacturing house. See advertisement in this Journal.

One of the evils of the day is substitution by the druggist—not every druggist—but complaint is being made that the substitution on the part of many druggists is getting to be so bold that the physicians will have to keep a watchful eye on this nefarious practice and send his prescriptions to the druggist who will fill them honestly and as directed by the doctor.

Hagee's Cordial of Cod Liver Oil Compound is one of the most popular cod liver oil preparations on the market. All the nutritive properties of the oil are retained, and the disgusting and nauseating elements are eliminated. It offers to the profession a reconstructive of great value. It is easily digested and assimilated, and as a builder it has not an equal.—International Journal of Surgery.

Abort an attack of Hay Fever by giving the patient 5 to 10 grains of the Suprarenal Capsules, 3 to 4 times for two or three weeks prior to the time for it to come on. Keep up the remedy throughout the Hay Fever season and much suffering will be avoided. Samples of the Adrenal Substance and literature upon the Suprarenal treatment may be obtained by sending professional card to Armour& Company, Chicago.

Dr. Nicholas Senn, one of America's nost noted surgeons, in company with Dr. D. R. Brower, Dr. Jacob Frank, all of Chicago, and Dr. Mastin, of Mobile, Ala., have started on a tour of the world. The noted American surgeons have been invited to hold clinics in the countries through which they travel. Their route will be through Germany, Russia-trans-Siberia, Korea, Japan, and home through Vic-

toria and Vancouver. The party will enjoy some good hunting and fishing and general recreation.—Ex.

The editor of this Journal had occasion to visit Nashville last week. This is a great city. The people are active, wide awake and progressive. Not only is Nashville a commercial city of considerable magnitude, but is known for its many educational interests and advantages. Chiefly of these are its Medical College and Medical Journals. The Medical Department of the University of Nashville, and the Medical Department of the University of Tennessee, and the Medical Department of the Vanderbilt University, are medical schools too well and favorably known to the medical profession of this country for us to make any comment. Each of these schools offers facilities for obtaining a thorough medical education which are not surpassed by any school in the country.

Everybody knows the condition—it's so extremely common and rebellious; some physicians call it general debility, or malnutrition, or nervous exhaustion, or a host of other names. Whatever its name or its cause, there exist the very striking facts that the blood has been impoverished, the nervous system ravished, the vitality sapped out. It would seem extremely rash to make the statement that any one remedy is equally efficacious in all of these cases, particularly so when the usually employed tonics—iron, strychnine, cod liver oil, etc.—have utterly failed. Yet such is the statement of thousands of physicians whose names are everywhere the synonyms for eminence, integrity, ability; physicians who represent all that is best in ethical, scientific medicine. It is this class of physicians who make the unqualified assertion that Gray's Glycerine Tonic Comp. is uniformly effective in malnutrition, general debility, nervous prostration—whether the condition accompanies organic disease, acute infectious diseases or exists without ascribable cause. Gray's Tonic begins aright in these cases; it makes a friend of the rebellious stomach—makes it docile, receptive, retentive. The patient improves from the start—has more strength, less depression and exhaustion. The physician notes the patient's ability to eat, digest and assimilate food—the dormant nutritive functions seem to assume new life. The blood rapidly regains the necessary elements for healthful nutrition of the entire body—the red blood corpuscles and haemoglobin increase hand in hand; nervous force, vitality, is re-engendered; irritability, sleeplessness and exhaustion disappear. Restoration of constitutional vigor and return to health is but a natural sequence; it usually results in a surprisingly short time.

Skepticism as to the truth of these facts may be entertained by those who have never given Gray's Tonic a fair clinical trial; but with those physicians who have tried the remedy, skepticism has yielded to the inexorable verdict of facts—actual, accomplished results. The experience of countless phyicians leaves no ground for doubt that Gray's Tonic is the remedy par excellence—the pleasant, uniformly effective remedy—in waste of tissue and impoverishment of blood and vitality. Its rapidity of action is especially noticeable in convalescence from typhoid fever, la grippe, pneumonia and other exhausting ailments. Its uniformity of action is a certainty in all.

Gray's Glycerine Tonic Comp. owes its distinctive value to the proportion of the contained ingredients and their manner of combination. All imitations lack these characteristics of the original and are consequently of inferior value.

A CORRECTOR OF IODISM.

Dr. W. H. Morse reports (Southern Clinic for May) success in the use of Bromidia, which he says has proved corrigental of Iodia. Duscussing his results, he says: "Vomiting is so frequent and troublesome a symptom, in many diseases besides irritation and inflammation of the stomach, as to demand much practical attention from the physician. So, although the causes are so various, and although we are actually treating a symptom, for this symptom Bromidia is remarkably effectual. We have all employed the remedy for colic and hysteria, two disorders where nausea and vomiting are as pronounced as they are persistent, and almost the first evidence of relief is shown by the disappearance of these disagreeable symptoms. It is quite as efficacious for the nausea and vomiting from ulcer or cancer of the stomach. There is nothing that will more quickly check the vomiting, and the hypnotic effect is quite in order."—Medical News.

HART'S ALIMENTARY ELIXIR is your food and stimulant in treatment of fevers. It is of especial value as a supportive agent; a valuable tonic and tissue builder.

HART'S BISMUTH CREAM is indicated in ALL Stomach Troubles; positive relief in Sub-acute Gastritis, Pyrosis, etc., also as a Cutaneous Dressing. "TRY IT."

If you do not know these preparations, samples will be furnished you by addressing E. J. Hart & Co., Ltd., New Orleans, La.

APROPOS OF BUTTONS.

There is, perhaps, nothing connected with modern civilization which shows the hollowness, emptiness and specious pretense of some of our social customs, so much as buttons. Everybody who has any sort of a just claim to be considered anybody has heard of Sloppy "Full Private Number One in the awkward squad of the rank and file of life," who as Dickens says was "born to be indiscreetly candid in the revelation of buttons; and whose every button glared at the public to quite preternatural extent." Every observing man, who has gone through the world with his eyes open, must have been struck at the appalling array of buttons which every civilized man and woman presents in their wearing apparel. Buttons that stare you out of countenance, buttons that are neither ornamental nor useful; buttons that button nothing. As mankind sinks in the scale of civilization, buttons gradually disappear, first the superfluous ones, and later the useful. The full-blown savage is untrammeled by clothes and he consequently goes about rejoicing in a single button—his umbilicus. The barbarous races make use of a few necessary buttons, and the civilized modern is distinguished, like Mr. Sloppy, by revealing in various parts of his form, "many surprising, confounding, and incomprehensible buttons."

When a man starts upon the downward path socially, the status at which he has arrived and his retrogression can be definitely gauged by the number of buttons which he can muster. The dirty, insolent, lazy, peripatetic hobo—the terror and disgust of the rural community—is generally pictured with his trousers hung by one suspender and that suspender having as a fulcrum a rusty nail. This representative of the lowest social order is as buttonless as a new born babe and consequently is graceless and reputationless—a social pariah.

Through the wisdom and experience of ages we have come to realize that few things in this world are wholly good, and few things wholly bad; but that most things are good or bad according to the use they are put, according to the motives which underlie their use, and according to whether they are used to excess or in moderation. This is as much as to say that man himself is always capable of influencing his envioronment, and therefore, no one can doubt but that man can rise to a development in which he would be superior to the influence of useless buttons.

The late President Garfield once said that he never saw a redcheeked, bright-eyed boy going to school, but what he felt like doffing his hat to him, on account of the possibilities which might be buttoned

up under that homely jacket. Here seemed to be a case of buttons buttoning up possibilities, and possibilities are always to be respected.

Everybody has heard of the bashful boy who while reciting his lesson got his inspiration from a certain button on his coat which he kept twirling about with his fingers. We know that also when his mischievous companions had shorn him of this helpmate, the brilliant scholar was no more able to recite than if he had been a hopeless idiot. This seems to be a case in which mental capacity depended entirely upon a single button.

All have heard of the shiftless man, or possibly we ought to say the man with a shiftless wife, who depends on a single suspender button for the covering of his nakedness. This seems to be a case in which a button occupied a very responsible position.

A few years ago a man was at work on the inside of the Washington monument near the top, when he lost his footing and down he went. In falling his clothes caught on a projecting spike and he hung suspended almost five hundred feet from the ground, his life depending upon whether his clothes could stand the enormous strain to which they were subjected. His buttons held fast and his life was saved. God bless the woman who sewed them on.

Some time ago a man at work in one of the quarries of Maine, was caught by the hook of a derrick, raised aloft, and swung out over the pit. There he hung for many long minutes, until rescued, and all the time his life depended upon the integrity of one single button. If that button had failed in its mission, this poor workman would have been hurled to certain death upon the rocks a hundred feet below.

In the light of these facts one would seem warranted in declaring that buttons have saved many lives.

Clara Barkis Peggotty, when her bosom swelled with love, and joy, and pride, was wont to bust her buttons with a crash and they went rolling about the room. Here seems to be a case in which virtues rose superior to the constricting power of buttons.

During the French Revolution, one of the burning questions of the day was that which related to the most economical method of supplying the French armies with food. A committee, said to have been made up of the most distinguished physiologists of France, was appointed by the republic, to inquire into the exact value of gelatin as a food product. This committee formulated its conclusions in the statement that a dozen bone buttons represented a certain amount of soup stolen from the poor. Verily, great is science! This seems to be a case in which buttons by forcing themselves into public notice gave

rise to a declaration that they were robbing the poor of their sustenance, and to rob the starving poor is certainly a grievous offense.

We meet people every day who are hollow, false and selfish, but who are yet maintaining an influential position in the community by going about buttoned up to the chin. Shore them of their buttons and they could not maintain their false position an instant. Such men are typified in the Tite Barnacle stamp of man, of whom Dickens said: "Mr. Tite Barnacle was a buttoned-up man, and consequently a weighty one. All buttoned-up men are weighty. All buttoned-up men are believed in. Whether or not the reserved and never exercised power of unbuttoning fascinates mankind, whether or no wisdom is supposed to condense and augment when buttoned up, and to evaporate when unbuttoned, it is certain that the man to whom importance is accorded is the buttoned-up man. Mr. Tite Barnacle never would have passed for half his current value, unless his coat had been always buttoned up to his white cravat."

Buttons have always been considered an important adjunct in maintaining discipline and to the end of upholding the majesty of the law. The officer of our home militia in giving his orders is always backed by a gorgeous array of buttons. He thunders his commands from a chest enclosed in a frock coat buttoned to the chin. Who would care a rap for his authority anyway, if it was not for his aggressive array of buttons? Could the city marshal and his efficient corps of officers uphold the majesty of the law for a moment, if they did not first stun the public by a bold, buttoned-up front? Who would have any respect for the law if it were shorn of its esoteric ceremonies, its millinery, and its buttons?

It is related of General Grant that nothing was so distasteful to him as the military frock coat. He had a great abhorrence of it. Now General Grant was a keen man and an able general; and it has been suggested that Grant may have considered that a general could possibly rise to a position in which he did not need to depend upon a much ornamented uniform to enforce his authority or preserve his dignity.

Who ever heard of an abdominal statesman rising in his seat in the common council, for the purpose of making a speech, without first buttoning his coat to the chin? Who would care a snap for his bombast and buncombe if he did not assert himself as a buttoned-up man?

Shore all public functionaries, military officers, and civic dignitaries of their frock coats and their omnipotent buttons and what could possibly prevent this country from going to the "demnition bow-wows?" Nothing could prevent this catasrophe—nothing, but an improvement in the material which such buttons button up.

Mighty as is the power and influence of buttons in the cases already cited, the list is not yet complete, for, undoubtedly, one of the greatest triumphs of the present age is the "Murphy button." By means of this ingenious little contrivance it is possible to afford a quick and ready outlet for the bile stored up in an over-distended gall-bladder so that the dammed up gall can quickly pass out of the body per vias naturales.

In fact, this is about the only button that is not more numerous than it ought to be, for since we see every day how egotism, self-conceit and assurance are able to quickly force their possessors to the front, while merit, thoroughness and ability lag behind in the rear; we realize that any device which affords a ready exit for what is vulgarly called "gall" ought to come into very general use.

The sum of the goodness, kindness and unselfishness going about unbound and untrammeled, only awaiting opportunity to pour itself out for others, is more than enough to make one proud that he belongs to the human family. The amount of self-sufficiency, egotism, specious pretense and false dignity going about masquerading behind a shut-in exterior is sufficient to make one wish that some men had been born peacocks, and then they would have been expected to strut around and display their plumage. Many men are trying to pass for what they are not, and to perform duties for which they have no fitness and such hypocrites hide their defects under a fair outside. Therefore, as a rule, beware of that man, in whatever calling he may be found, who maintains his reputation by urging his button at you at every available opportunity.

The moral of this tale is obvious—don't button yourself up too tight, and if needs you must, try and button up something worth the buttoning.—Journal of Med. and Science.

SANMETTO IN URETHRAL STRICTURE.

Dr. Jos. Swindell, of West Burlington, Iowa, writing, says: "I have been using Sanmetto for several years. I find nothing that suits me as well in genito-urinary diseases. I am using it right along in conjunction with treatment of urethral stricture. It soothes, checks and prevents smarting and inflammation that is so common after passage of bougie. Its ease of administration and formula should recommend it to the profession."

COLLECTIVE INVESTIGATION OF THE INFLUENCE OF THE SILVER NITRATE INJECTIONS ON PHTHISIS.

To the Members of the Medical Profession:

In 1892 the undersigned began a collective investigation of the action of cold in the treatment of acute pneumonia and there is reason for believing that this procedure which resulted in gathering four hundred cases of this disease thus treated, with a death rate not quite 5 per cent., was an important factor in calling attention to the utility of that treatment, and in introducing it to the profession of this country. That research was based on the conviction that no remedy can be called truly successful until it has passed the exacting crucible of clinical experience, and it is now proposed to apply the same ordeal to the silver injection treatment of phthisis, which, in a large hospital, dispensary and private practice, reaching over a period of three years, and during which many thousand injections were administered, has given me greater satisfaction than any other method that I have ever employed. In keeping with the above expressed feeling a cordial invitation is herewith extended to those members of the profession who have the inclination and opportunity to investigate this method of treating phthisis and to whom a reprint on the subject with full information and blanks to report cases, will be cheerfully sent on application.

Thomas J. Mays, M. D.,
1829 Spruce St., Philadelphia, Pa.

Aug. 15, 1901.

THE MOSQUITO AN INSIGNIFICANT FACTOR IN THE PROPAGATION OF YELLOW FEVER.

By Dr. John H. Purnell.

A number of cases are presented, and to the author it seems utterly impossible to reconcile the mosquito theory with the recital he gives. Hhe notes several instances within the last few years in the South, where yellow fever has been completely stamped out, "without, so far as is known, the killing of a mosquito." He concludes that if the combating of yellow fever has been accomplished by controlling and destroying other agents than the mosquito—ignoring the mosquito entirely—then it seems that the mosquito has not been proved guilty of being the sole conveyor of the yellow fever germ. Future observation and study will convince the profession that fomites cannot be ignored.—N. Y.

Society Reports.

JEFFERSON COUNTY MEDICAL SOCIETY.

Stated Meeting, July 8, 1901.

Dr. W. E. B. Davis, President, in the chair. Topic for the evening: "Pneumonia." Discussion was opened by Dr. T. D. Parke. The consideration of the double circulation in the lungs is of great importance in the study of croupous pneumonia. The blood going to the lungs through the pulmonary arteries is venous and has no trophic function—the lungs receiving their nourishment from the blood supplied by the bronchial arteries. Dr. Smith has formulated a theory concerning croupous pneumonia on the foregoing facts about the circulation: At all times pneumic acid is generated in the lungs (in the alveoli ?) during health, this uniting with the sod. bicarb. in the blood (pulmonic) is neutralized, carbonic acid gas being set free. In croupous pneumonia (due to pneumococcus infection) there is not a true inflammation of the pneumonic tissue, but exudative changes occur, from the blood-vessels into the alveoli. In the stage of complete consolidation there is practically stasis of the pulmonic circulation, but as the nutrition is supplied by the bronchial vessels, degenerative changes in the pulmonic tissue do not occur. On account of the stasis of the pulmonic circulation there occurs a gradual accumulation of pneumic acid in the alveoli, and this finally kills the pneumococci. In this way the crisis is accounted for by Smith. During recovery most of the exudate is taken up by the lymphatics.

In children, Broncho-pneumonia is far more frequent than croupous, and in young children is very fatal. The diagnosis of the two diseases is often difficult. Usually the history of measles, whooping cough, diphtheria, and even depressed vitality due to gastro-intestinal disorders will be obtained if the child has broncho-pneumonia. In the first days of the disease the physical signs are those of bronchitis, but if the temperature reaches 104° the diagnosis of broncho-pneumonia is justifiable. About 4 per cent. of all cases of croupous pneumonia in children are fatal. The temperature in this disease runs a more regular course than in broncho-pneumonia.

The treatment in children is to reduce the temperature by sponging or tubbing with water at 85°-90°. Ice bags control the pain nicely. The pain is frequently referred to the abdomen. Alcohol has no field of usefulness in croupous pneumonia. Strychnine should be used, but too much may easily be given. Antipneumoccic serum has proved of little value as a therapeutic agent. Too much food should be avoided, nor should much nauseating expectorants be used.

Dr. T. L. Robertson.—The rapid cessation of the symptoms in croupous pneumonia is probably due to the interaction of an antitoxin produced in the blood of the patient and the toxin produced by the germ.

Tuberculosis frequently develops in cases where there is delayed resolution.

The mortality is just about the same as it was 100 years ago—from 20 to 40 per cent.

Little medicine should be given. Alcohol does good work in the later stages of the disease. Patients do not stand the cold bath as well as in typhoid fever.

GENERAL DISCUSSION.

Dr. D. E. H. Sholl.—The temperature in broncho-pneumonia in children may vary from 99°-106°, and the disease may continue for as long as four weeks.

Treatment.—Negroes bear stimulants well—they have only about two-thirds the vital pulmonic capacity of the white man, and a white man's chances for recovery are about five times as good as the negro's. In most cases whisky in quantities varying from Oj-Oij in twenty-four hours acts well. Twenty-five years ago the treatment was to put a blister over the seat of the pain and bleed one quart. Patients usually slept well after these procedures and the crisis usually occurred on sixth day.

Dr. C. A. Fox.—Thirty cases of croupous pneumonia in St. Vincent's Hospital have recently come under his observation. Fifteen cases were bled and immediately infused with saline solution, all recovering from the disease. The other fifteen cases were not bled or infused and the mortality was from 20 to 25 per cent.

Dr. H. N. Rosser.—In his experience the mortality in croupous pneumonia had been about 3-4 per cent. A temperature of 104° need not be bothered, if it is desired to reduce the temperature, sponging with tepid water and fanning is the best method. Excessive degrees of cold are not necessary. The terror of the cold bath will cause an elevation of the temperature.

Dr. F. A. Lupton.—Not infrequently cases which are pronounced croupous pneumonia in their early days prove later to have been tuberculosis. One case in his experience had shown tubercle bacilli on the tenth day in the sputum, the patient had been treated for pneumonia. In his private practice during this year he has seen several cases, but the death rate has been quite low.

Dr. G. S. Brown.—The disease is very fatal in the aged, hence the death rate is high. Saline infusion after venesection must be a rational procedure.

Dr. J. D. Gibson.—The methods of treatment outlined are correct for the late stages of the disease, but in the early stages many cases can unquestionably be aborted by use of large doses of quinine.

Dr. J. C. Abernathy.—Blisters are very useful in cases of delayed resolution. Old line of treatment was by bleeding, blisters and administration of veratrum. The excessive use of whisky undoubtedly has something to do with the high death rate. Mortality in his cases has been about 6 to 8 per cent.

In closing, Dr. T. L. Robertson.—The mortality is high. Prolonged cases are frequently tubercular from their beginning. Cardiac failure is due to overwork, high temperature, and toxemia. Quinine seems to act well in early stages, but many cases die suddenly after its use in large doses.

Treatment.—Open the bowels, place ice bag to affected side; give proper fluid nourishment; use whisky (not to exceed eight ounces in twenty-four hours) in later stages.

Dr. T. D. Parke.—Cases recover just as quickly and satisfactorily without the use of alcohol as with it.—E .A. J.

A CORRECTION.

In the June issue of the Journal, Dr. R. B. Harkness was reported as having stated that he had seen a case of puerperal eclampsia in an infant whose mother had been suffering from that trouble. The doctor of course did not intend to convey the idea that an infant could have any puerperal disease, but that convulsions occurred in this child immediately, or soon, after its birth, and as its mother had had convulsions during the labor, he suggested that the cause of the attacks was the same in both cases. This correction is gladly given notice.—E. A. J.

THE HOT VAGINAL DOUCHE.

An editorial in the Lancet-Clinic for May, states that "In female pelvic troubles there is no one remedial measure that is so much used and gives such good results as hot water vaginal injections."

Special stress is laid upon the quantity and temperature of the water and it is stated that from two to three gallons should be used and at a degree of about 112°.

However, to check abnormal secretions some astringent antiseptic should be used and for this purpose Micajah's Medicated Uterine Wafers are particularly indicated.

Those wafers exert a tonic effect upon the mucous membrane and prevent reaction after douching.

A thorough hot douche followed by the insertion of a Micajah's Wafer presents an ideal treatment for diseases of the female genital tract.

Abstracts.

Protan, a New Intestinal Astringent.

Introduced by H. K. Mulford Co.

Protan is a definite chemical compound, formed by the synthesis of tannic acid, with nucleo-proteid, containing 50 per cent. of tannic acid. It forms a light brown powder, is tasteless, odorless and entirely free from astringent action upon the mouth and stomach. It is insoluble in water, acid solutions or the gastric juice; does not coagulate albumen, nor precipitate pepsin or peptones, is unaffected by gastric juice and passes through the stomach chemically unchanged; it is therefore entirely free from deleterious action upon the stomach and processes of digestion.

Protan first devolves its active astringent ingredient—tannic acid, when it reaches the small intestine and comes in contact with the alkaline pancreatic juice. Free tannic acid is very slowly evolved from Protan as it passes downward through the intestines, so that its astringent action is manifested throughout the entire intestinal tract. This fact is verified by the appearance of minute quantities of both Protan and tannin in the feces.

Protan owes its influence to the presence of tannic acid so combined that this body reaches the intestines chemically unchanged. The astringent action of tannin, as all authorities agree, is due to the fact that it precipitates (coagulates) the albuminoid bodies of mucous membranes which coagulation leads to an actual shrinkage of the structures, with constriction of the capillaries and diminution of secretion. When tannic acid is administered by the mouth, these changes take place in the stomach, so that not only is the gastric mucous membrane and the process of digestion seriously impaired, but the tannic acid is decomposed by the gastric juice into gallic and pyrogallic acids, which are non-astringent; hence, very litte, if any, of the tannic acid reaches the intestines in a chemically unchanged (astringent) form. Protan, on the contrary, passes through the stomach in its original form and presents to the intestines a definite amount of tannic acid, chemically unchanged and actively astringent. The well-known properties of tannic acid towards albuminoid bodies are here manifested; the growth of bacteria is hindered, their toxins rendered inert, the intestinal mucous membrane is contracted, covered with a superficial coagulum, the capillaries constricted and the exudation of leucocytes prevented. Thus is explained the remarkable clinical value

of Protan in all catarrhal and ulcerative conditions of the intestines, associated with diarrhoea.

INDICATIONS.—Protan may be said to be the ideal astringent. It is even in enormous doses, harmless and free from irritating properties. It is not astringent to the mouth or stomach, nor are the processes of digestion impaired in the slightest degree. These qualities are not possessed by any other known intestinal astringent.

PROTAN has the unique distinction that it is effective in all forms of diarrhoea—acute catarrhal diarrhoea, chronic enteritis, diarrhoea of phthisis, and in infantile diarrhoea. In the diarrhoea dependent upon the growth and multiplication of bacteria, Protan is especially valuable; it so changes the chemical nature of the albuminoid contents of the intestines that they no longer offer the food necessary for micro-organismal growth.

PROTAN exerts its astringent action upon the entire intestinal tract from the duodenum to the lowermost portion of the large intestine.

In acute catarrhal diarrhoea (cholera morbus) due to the ingestion of unsuitable food, the use of Protan is best preceded by castor-oil, or other laxatives in order to remove the offending materials from the intestines. Fifteen grain doses of Protan, repeated every hour or two, speedily effects a complete cure.

Chronic diarrhoea, due to chronic catarrhal inflammation or ulceration of the small or large intestine, is most satisfactorily treated by means of Protan. The remedy seems to be equally effective in the obstinate, rebellious forms that have resisted the usual astringents, etc. In these chronic forms of diarrhoea, Protan should be administered in twenty or thirty grain doses every two or three hours, as required.

Infantile diarrhoea: particular stress is laid upon the efficacy of Protan in the summer diarrhoeas of infancy and early childhood. The fact that Protan never induces undesirable local or constitutional symptoms entitles it to preference; it may be safely given in the regular doesage to the youngest or weakest infant.

In the acute diarrhoea of bottle-fed infants, Protan should be given in from three to five grains every hour until the bowel movements are materially reduced in quantity and frequency; then three grains every two or three hours as required.

In the severe forms of Infantile diarrhoea—entero-colitis and cholera infantum—the persistent judicious use of Protan will result in a complete cure in a very large majority of cases. The dosage in these cases is five grains every two hours, according to individual requirements.

In Typhoid fever attended with excessive bowel movements, Protan yields excellent results in reducing the frequency and amount of the stools. In hemorrhage from the bowels, occurring in typhoid fever, dysentery, etc., Protan coagulates the blood at the seat of hemorrhage. It is an ideal intestinal styptic in doses of thirty grains every hour or two .

Protan has been found by experience, to offer most satisfactory adjunctive treatment in the diarrhoeas of phthisis, chronic dysentery and those occurring in the course of chronic heart and liver diseases. In such cases the dosage varies between twenty and thirty grains, repeated according to the physician's judgment.

Protan is furnished in powder form in one ounce cartons, for dispensing in cachets, capsules or powders. Price $6.00 per dozen ounces. Protan is also furnished in friable tablet form, and in combination.

TREATMENT OF HEMORRHOIDS.

Dr. J. P. Tuttle, as noted in Amer. Med., believes that in many acute cases of internal hemorrhoids, local and general measures should be resorted to rather than operative procedures. Cold water enemas once or twice a day are of great benefit in order to produce an easy movement of the bowels and to contract to some extent the blood-vessels. Injections of non-irritating astringents, such as the fluid extract of krameria, fluid extract of hamamelis, or Pinus Canadensis, will have a very soothing and curative influence. Suppositories of ichthyol, tannic acid and belladonna are of great benefit, especially if there is an eroded condition of the parts. Resinous cathartics, such as podophyllin, aloin, gamboge, etc., irritate the parts and should not be used. Small doses of saline laxatives, especially sodium phosphate, b fore breakfast, followed after breakfast by a cold enema, will have splendid effect upon the liver, intestine, and hemorrhoids.—Atlanta Medical Journal.

Dad's Quinine Pills to hand in due time, and I will say that I was very much pleased with their use, having been quite indisposed and threatened with the "grip," and also being hypersensitive to quinine thought I would use them. Your pills served me very well, with no ringing in the ears nor other unpleasant symptoms. Was very much pleased with their action. C. W. Bowen, M. D.

Westfield, Mass.

Vanderbilt University,

Medical Department,

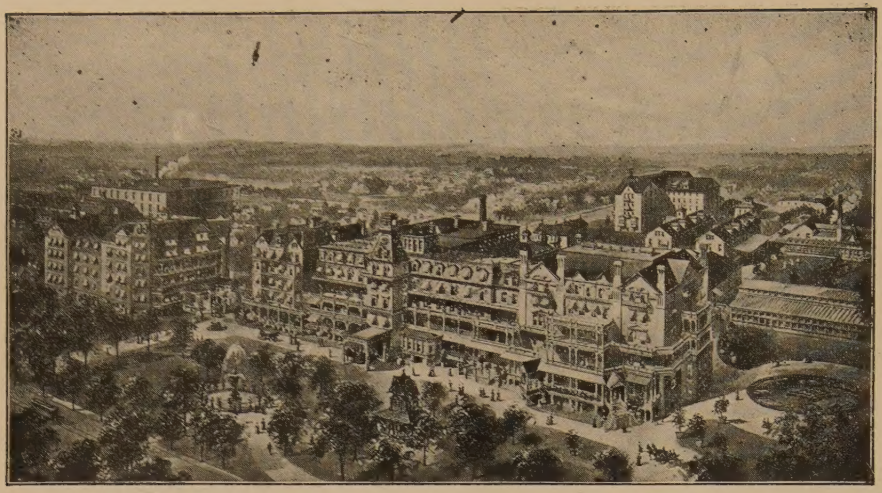
Nashville, Tennessee.

The 28th annual session of this institution will open October 1, 1901, and will close April 3, 1902. There will be no Preliminary Session. Students will be expected to be present on the opening day. The course of instruction is strictly graded, and covers a period of four years. The 1900-1901 class was the last three year class ever to be graduated from this institution.

For admission into the first year class a first grade teacher's certificate is the minimum requirement. Graduates of colleges and universities may take the work of the first two years in one session. Each of the four classes is taught separately. The method of instruction is by didactic lectures, clinical lectures, recitations, conducted by the professor, and in laboratories, the recitation and laboratory work being properly emphasized. At the end of each session every student stands an examination on the studies of that year, and if he belongs to an undergraduate class, he gets a certificate showing the grades that he may have made. If these grades are satisfactory, this will entitle him to advancement into the next class the following year, or any subsequent year. Certificates of proficiency from other reputable medical colleges will be accepted, and the student will be advanced accordingly. Members of the fourth year class, having made satisfactory grades, will be entitled to receive the degree of M. D.

The department is in a splendid building, erected six years ago for the purposes of medical teaching. The laboratories are large and well equipped. Clinical material, at the college and at the hospital, is abundant. Eleven clinics each week. All students entitled to attend the five college clinics every week, but only third and fourth year men will be required to attend the clinics at the city hospital. The graduates of the Medical Department of Vanderbilt University are sent forth well equipped for their professional life. For further information write to

GEO. H. PRICE, M.D., Secretary,
Corner Churchand Spruce Streets, Nashville, Tenn.



The Battle Creek Sanitarium

Is a place where chronic invalids, especially those suffering from the various forms of indigestion, the diseases peculiar to women, constipation, chronic malarial poisoning, anemia, obesity, the uric acid diathesis, neurasthesia, migraine, and similar ailments are trained into health by the aid of systematic regimen, scientific hydrotherapy, massage, Swedish movements, Swedish gymnastics and other rational means. Most cases of Bright's disease, diabetes, locomotor ataxia, and many other maladies which are incurable under ordinary conditions, are greatly improved by the combined use of rational remedies and systematic regimen, and many are practically cured. Extensive bacteriological, chemical and microscopical laboratories connected with the institution afford excellent facilities for accuracy in diagnosis and original research.

THE INSTITUTION IS CONDUCTED STRICTLY WITHIN ETHICAL LINES.

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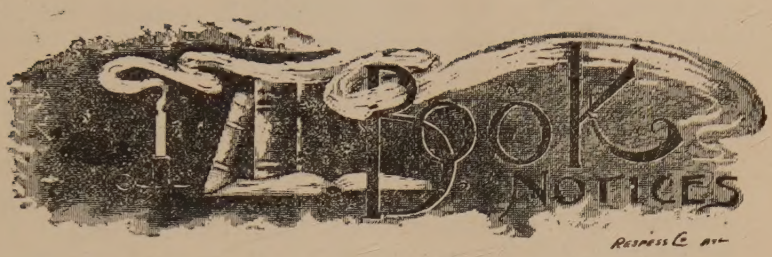

ESSENTIALS OF REFRACTION AND OF DISEASES OF THE EYE. By Edward Jackson, A. M., Emeritus Professor of Diseases of the Eye in the Philadelphia Polyclinic. Third Edition, Revised and Enlarged. 12mo., 261 pages, 82 illustrations. Philadelphia and London: W. B. Saunders & Co., 1901. Cloth, $1 net.

In this edition the work has been carefully revised and very much enlarged, the contents being more complete and more symmetrical than was possible in the earlier editions. The injuries of the eye by traumation, and the ocular symptoms and lesions of general diseases have now been given a consideration proportioned to the great importance they assume in the work of the general practitioner. There has been added also an account of the application of the tests of vision required in the army, navy and railway service.

This work has long since proved its usefulness to the beginner in ophthalmic work, to the student, and to the busy practitioner. Dr. Jackson, its author, is well known as a successful teacher. The entire ground is covered, and the points that most need careful elucidation are made clear and easy.

THE HYGIENE OF TRANSMISSIBLE DISEASES: THEIR CAUSATION, MODES OF DISSEMINATION AND METHODS OF PREVENTION. By A. C. Abbott, M. D., Professor of Hygiene and Bacteriology, University of Pennsylvania. Third Edition, Revised and Enlarged. Octavo, 351 pages, with numerous illustrations. Philadelphia and London: W. B. Saunders & Co. Cloth $2.50 net.

During the interval that has elapsed since the appearance of the first edition, investigations upon the modes of dissemination of certain of the specific infections have been conspicuously active, and through them much new light has been shed and many novel suggestions have been made; especially is this the case with regard to the roles of insects and rodents as disseminating factors. Wherever practicable, these views have been embodied and discussed. The sections especial-

ly on Malaria, Yellow Fever, Plague, Filariasis, Dysentery and Tuberculosis have been both revised and enlarged.

PRACTICAL SURGERY: A WORK FOR THE GENERAL PRACTITIONER. By Nicholas Senn, M. D., Ph.D., LL. D., Professor of Surgery, Rush Medical College, Chicago. Handsome octavo volume of 1,133 pages, with 650 illustrations, many in colors. Philadelphia and London: W. B. Saunders & Co., 1901. Cloth, $6 net.

This is Dr. Senn's great work, and its appearance has been awaited by the profession with much interest, for it represents the practical operative experience of the author for the last twenty-five years. The book deals with practical subjects, and its contents are devoted to those sections of surgery that are of special interest to the general practitioner. Familiar with the needs of the general practitioner as a surgeon, the author has aimed to simplify and lighten his often trying work by a full discussion of those subjects that come within the legitimate sphere of the daily routine work of every practicing physician. Special attention is paid to emergency surgery. Shock, hemorrhage and wound treatment are fully considered. All emergency operations that come under the care of the general practitioner are described in detail and fully illustrated.

The section on Military Surgery is based on the author's experience as chief of the operating staff in the field during the Spanish-American war, and on his observations during the Greco-Turkish war. Intestinal Surgery is given a prominent place, and the consideration of this subject is the result of the clinical experience of the author as surgeon and teacher of surgery for a quarter of a century. The text is profusely illustrated, in the hope that this feature will add to the value of the book as a guide to practice.

ESSENTIALS OF THE DISEASES OF CHILDREN. By William M. Powell, M. D. Third Edition. Thoroughly Revised by Alfred Hand, Jr., M. D., Dispensary Physician and Pathologist to the Children's Hospital, Philadelphia. 12mo., 259 pages. Philadelphia and London: W. B. Saunders & Co. Price $1 net.

In this revised edition numerous additions and changes have been made in the book so that it continues to represent the present state of pediatrics. The book aims to furnish material with which students may lay the foundation for the successful practice of medicine among children. The section on Infectious Diseases has been rewritten, as well as many of the paragraphs on pathology. A number of new chapters have been added, among others, one on Infant Feeding.